LOYOLA
UNIVERSITY CHICAGO
AD · 1870 · MAJOREM · DEI · GLORIAM

The Graduate School

REQUEST TO AUDIT
A GRADUATE COURSE

Name: _____
              Last   First   Middle

LUC ID#: _____   Program: _____

Email: _____@luc.edu   Phone: _(_____)_____

Policies and Procedures:

- **The decision to open particular graduate courses to auditors is made by the program/department offering the course.** In order to audit a course, a Graduate School student must complete this entire form, receive approval from the program/department offering the course, and submit it to the Graduate School.
- **The completed form must be received by the Graduate School by the end of the second week of the semester or by the end of the first week of the summer or intersession term.** The Graduate School will not approve a request received after the deadline.
- **The student is responsible for registering for the course in LOCUS** and must do so prior to the late registration deadline to avoid a late registration fee. Completion of this form does not constitute registration for the course.
- **The tuition rate for audited courses is 50% of the regular tuition rate.** Students will be billed for the full amount and then receive an adjusted statement. In order to avoid payment fees, students must pay 50% of the full tuition upon receipt of the first bill. For more information about tuition and fees, visit the Bursar's website at www.luc.edu/bursar.
- An audited course does not count as hours attempted, and therefore is not considered in a student's enrollment status as a full-time or part-time student. It is also not eligible for coverage by a tuition scholarship.
- **Once a course is converted to audit for a student, it will not at any time be re-classified as credit hours completed toward degree requirements.**
- **Class attendance is required.** A grade of AU indicates satisfactory attendance; a grade of W will be assigned in cases of unsatisfactory attendance. Auditors have a right to participate in class discussions, but do not complete course papers, examinations, or other assigned projects.
- **Please return completed form to the Graduate School, Granada Center 400, LSC.**

I am requesting to audit the following graduate level course. I have read and understand the policies noted above.

Call #:_____ Course Prefix:_____ Course #:_____ Section #:_____ Term:_____ Year:_____

Student Signature: _____
                                                                    Date

Graduate Program Director: _____
                              Printed Name   Signature   Date

Graduate School Approval: _____
                              Printed Name   Signature   Date