



TTUHSC EL PASO

Texas Tech University Health Sciences Center El Paso

Office of the Registrar
2C201 Medical Science Building (MSB) II

AUDIT REGISTRATION FORM

Students should not register for the class as a credit-bearing course when planning to audit. Audit course does not earn credit and audit students are liable for the audit fees detailed below.

Courses may be audited under the following provisions:

1. A complete and signed Audit Registration form is required for each course being audited after classes begin and prior to the 'Census Day' of the course's term.
2. No grades are assigned and no credit is awarded for audited courses.
3. The extent of allowed class participation is at the discretion of the instructor.
4. Credit by examination for audited courses is not permitted. Formal course registration and full payment of tuition and associated fees required if credit by examination is approved by school-level designee.
5. Clinical, laboratory (organized laboratory classes), or courses specified in auditing student's degree plan are ineligible for audit unless directly prescribed by a school-level remediation plan. Audit students are responsible to verify with school to ensure audited course is not within an excluded category.
6. Course Audit Fees:
 - a. Students enrolled less than full-time for the semester must pay a \$10.00 fee.
 - b. No charge assessed to students enrolled full time for the semester.
 - c. No charge assessed for students over 65 years of age.
 - d. Audit Registration fees are non-refundable, even in the event form is submitted in error.
7. This form must be signed by the student, course instructor and by School-level designee.
8. Completed forms must be delivered to Registrar's Office where a copy is provided to submit to Student Business Services (SBS) for payment.

Complete the following Student Information (Please Print)

Last Name: _____ First Name: _____ R Number: _____

Course Level: _____ Term: _____ Year: _____

CRN: _____ Subject: _____ 4 Digit Course #: _____

Student Signature: _____ Date: _____

Instructor Signature: _____ Date: _____

Dean/Designee Signature: _____ Date: _____