

SGPS Graduate Course Audit Form

This form is to be used by graduate students wishing to audit a graduate-level course.

Please see 6.04 of the Graduate Regulations for important information regarding auditing graduate courses.

Student Name:

Graduate Program:

Student Number:

Degree:

AUDIT	DROP AUDIT	SUBJECT/COURSE TITLE	COURSE NUMBER	SECTION	TERM	INSTRUCTOR'S SIGNATURE OF APPROVAL

Comments/Expectations:

(must be completed by the course instructor)

After obtaining all necessary signatures, submit this form to reg-enrollment-services@uwo.ca

Student Signature

Date

Supervisor Signature

Date

Graduate Chair Signature

Date

SGPS Approval

Date

The personal information on this form is collected under the authority of *the University of Western Ontario Act, 1982*, as amended.
For a complete Collection Notice, visit www.grad.uwo.ca.