

IOWA STATE UNIVERSITY

Refer to the Iowa State University Catalog, Undergraduate and Graduate Courses and Programs, for Policy

REQUEST FOR AUDIT(S) TO APPEAR ON TRANSCRIPT

UNDERGRADUATE

Name (type or print)

Univ. ID #

Major

I request the following course(s) be added to my permanent record. I registered for the course(s) as audit(s) and the instructor's signature(s) below indicate I was actively involved in the course(s).

Dept. Name and Course Number	Semester & Year Audited	Instructor's Signature <i>(indicates student was actively involved in the course)</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Student's Signature

Date

Adviser's Signature

Date

Approved:

College Student Services

Date

Return to:
Office of the Registrar
Records Area
214 Enrollment Services Center