**Course Auditor Application**



**Registrar’s Office**

(913)253-5026

Registrar- tahmeka.thompson@spst.edu

Registrar’s Clerk- ethel.tomlinson@spst.edu

# Requirements

Applicants must complete and sign this Auditor Application form and submit to the Registrar’s office. All courses must be approved by the instructor of the course. The Registrar will facilitate this process. Auditor fees are listed below.

|  |
| --- |
|  |
| Audit fee for enrolled degree seeking students | $75.00 per course |
| Community Organizer’s Fee/ Alumni Fee | $200 per course |
| Non-Active/ Non- Alumni Fee | $175 per credit hour |

# Personal Information

Surname First Name Middle Name Preferred Name

**Enrollment Information**

*Please indicate which course you would like to audit.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  Course Code: |  |  | Course Title: |  |
|  Year: |  |  | Professor: |  |
|  Term: |  | Fall □ Winter □Spring □ Summer □ | Campus: | Kansas City □Oklahoma City University □ |

## Certification

Auditor Signature Date

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Faculty Signature Date