



Return this form to: RCC Registrar's Office
 3345 Redwood Hwy Email: registrar@rogeucc.edu
 Grants Pass, OR 97527 Fax: 541-471-3576

2021/2022 AUDIT COURSE REQUEST

Date _____ RCC ID# _____ Term _____

 Last Name First Name MI

I am requesting to audit the course(s) listed below. I understand that I will not receive credit or a grade for any course that I request to audit. Audited courses will show on my transcript as AU. Additionally, I understand that I am still financially responsible for all courses that I request to audit.

Course Number

Course Title

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

By checking this box, I certify that I am not receiving Financial Aid for the term in which I am requesting to audit my course(s). Financial Aid will not pay for audited courses.

 Student's Signature (required)

DEADLINES TO AUDIT A COURSE

Summer: Aug. 12, 2021 Winter: Feb. 25, 2022
 Fall: Nov. 12, 2021 Spring: May 27, 2022

[processed: by _____ date _____]