



Sam Houston State University

MEMBER THE TEXAS STATE UNIVERSITY SYSTEM

OFFICE OF THE REGISTRAR

Audit Request Form

An audit request form must be fully complete with the required signatures before it will be processed.

Audit Request Forms are accepted the 2nd-12th class days during full fall/spring/summer terms; the 2nd-4th class days during summer I & II terms; and the 2nd class day during 7A/7B, 5A/5B/5C, and summer mini session parts of term. If seats are not available, you may not audit the course. If a seat is available, the audit request form will be processed and a \$50.00 per course payment must be paid to the [Cashier's Office](#). You will be notified via email when the form has been processed.

- **Current SHSU Students:** Submit the completed form to the Registrar's Office / regforms@shsu.edu.
- **Audit Only Students:** Submit the completed form to the Admissions Office / admissions@shsu.edu.

Student Name: _____ **Sam ID # (If SHSU Student):** _____

Primary Phone #: _____ **Alternate Phone #:** _____

CRN	Course Prefix & Number (ex: MATH 1314)	Professor/Chair Signature

Audit Only Students (No Prior SHSU Admission):

Permanent Address: _____
Street City State Zip

Email Address: _____ DOB: _____

SSN#: _____ Gender (Check One): Male Female Prefer not to say

Emergency Contact Information:

Full Name: _____
First Last M.I.

Relationship: _____

Permanent Address: _____
Street City State Zip

Primary Phone #: _____ Alternate Phone #: _____

For Admissions' Use Only:	For Registrar's Use Only:
SPAIDEN ID# SAAADMS 'UN' <input type="checkbox"/> Student Type (N-Non-Degree Seeking) <input type="checkbox"/> Admissions Code (UT-Audit Only) <input type="checkbox"/> Curricula Program (Undeclared)	<input type="checkbox"/> SOAHOLD 'X 1' (Use only for NON-SHSU Students) <input type="checkbox"/> SZAREGS Grade Mode 'A' for Audit <input type="checkbox"/> Notify Student Financial Services & Scan to BDMS
_____ Processed By Date	_____ Processed By Date