

AUDITOR PROGRAM REGISTRATION FORM

+++++
Instructions:

- (1) Please fill the form and have the course instructor sign it. Your registration form CANNOT be processed without the instructor's approval. Registration is contingent upon course availability after our advanced registration period.
- (2) You MUST submit this form *in-person* and show a government issued form of photo identification or a current PennCard.

+++++

Last Name: _____ First Name: _____

Social Security Number: _____ - _____ - _____ Date of Birth: _____ Sex: M F
Enter last after obtaining permission to audit course

Home Address: _____

City: _____ State: _____ Zip Code: _____

Daytime Phone No.: _____ E-mail Address: _____

Penn Employee: Yes No If yes, Office or Department: _____

Current Term: _____ Current Year: _____

Course Identification: _____
Department Course Number Section Number

Course Title: _____

Permission to audit this course: Approved Denied

Instructor's Signature: _____

Ethnicity: Please check one. (Optional, for government reports only.)

American Indian/Alaskan Native

Asian/Pacific Islander

Black/African American

Hispanic/Latino

White/Caucasian

Other _____

Have you ever applied for admission to the University of Pennsylvania before? Yes No

If you previously applied to Penn, please indicate to which school you applied, when, and the results:

School at Penn to which you applied Year of Application Results: Admitted/Denied

I understand that, as an auditor, I will be officially enrolled in this course, but I will not receive a grade or academic credit. **I acknowledge that my enrollment is subject to the LPS academic calendar and deadlines, which differ from other Penn calendars**, and I understand that I will be charged the prevailing tuition and fees of the school or college that is offering the course (tuition for non-LPS courses is significantly higher than LPS tuition).

Signature: _____ Date: _____