## Senior Citizen Audit Registration Worksheet



**Student Directions:** Prior to submitting this form you will need to submit the Senior Citizen Audit Application only if you have not enrolled at USF in the past three (3) semesters. You will need the course and instructor information to complete this form. This can be found In the Schedule Search and University Directory. If the instructor is listed as "Staff" or "TBA" please contact the department. Completing this worksheet does not guarantee registration in the courses below. Students will not be registered in closed/full courses. It is the student's responsibility to attain the appropriate approvals of the course(s) indicated below.

| Student Name | USFID Number  |
|--------------|---------------|
| Home Campus  | Term and Year |

By signing below, you are agreeing to abide by <u>University policy</u> to audit this/these course(s).

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

Please Note: Choose more than one course as you will not be registered for closed/full courses.

**Policy for Instructors:** By signing below, you are agreeing to abide by <u>University policy</u> allowing the student listed above to audit the course(s) listed below.

## Priority courses listed below.

| Campus | CRN | Subject | Number | Section | Title | Instructor's signature/approval |
|--------|-----|---------|--------|---------|-------|---------------------------------|
|        |     |         |        |         |       |                                 |
| Campus | CRN | Subject | Number | Section | Title | Instructor's signature/approval |
|        |     |         |        |         |       |                                 |
| Campus | CRN | Subject | Number | Section | Title | Instructor's signature/approval |
|        |     |         |        |         |       |                                 |
| Campus | CRN | Subject | Number | Section | Title | Instructor's signature/approval |
|        |     |         |        |         |       |                                 |

## Alternative courses can be listed below in order of preference.

| Campus | CRN | Subject | Number | Section | Title | Instructor's signature/approval |
|--------|-----|---------|--------|---------|-------|---------------------------------|
|        |     |         |        |         |       |                                 |
| Campus | CRN | Subject | Number | Section | Title | Instructor's signature/approval |
|        |     |         |        |         |       |                                 |
| Campus | CRN | Subject | Number | Section | Title | Instructor's signature/approval |
|        |     |         |        |         |       |                                 |
| Campus | CRN | Subject | Number | Section | Title | Instructor's signature/approval |
|        |     |         |        |         |       |                                 |