



Return to:
 Office of the Registrar
 Oregon State University, B102 Kerr Administration Building, Corvallis, OR 97331-2130
 T 541-737-4331 | F 541-737-8123 | registrars@oregonstate.edu | http://oregonstate.edu/registrar

OSU Audit Registration Form

Term _____ **This form cannot be processed without the required signature.**

Name: _____ OSU ID #: _____
Last *First* *Middle Initial*

CRN _____ Subject _____ Course Number _____ Credits _____
Lecture

CRN _____
Lab

CRN _____
Recitation

CRN _____
Studio

Instructor Approval _____ **Date** _____

Dean or Head Advisor Approval _____ **Date** _____
Undergraduate Students Only

■ Audit registration is only allowable during the second full week of the term (AR 30).
 For dates, see Academic Calendar at <http://calendar.oregonstate.edu/osu+osu-academic/>