

- FALL 20____
- SPRING 20____
- SUMMER 20____

Name: _____ Student ID#: _____

Email: _____ Phone #: _____

AUDIT ENROLL

| Course ID # (ENGL101) | Section # (4-digits) | Units | Instructor Name |
|-----------------------|----------------------|-------|-----------------|
| | | | |

Reason for auditing: _____
