LOS ANGELES CITY COLLEGE
LACC
The City's College.

Los Angeles City College
Admissions and Records Office
(323) 953-4000 ext. 2104
admissions@lacitycollege.edu
www.lacitycollege.edu

Request for Enrollment of a Class as an Audit

Los Angeles City College students may be permitted to audit a class under the following conditions:

A. Permission to enroll in a class on an audit basis is at the instructor's discretion. Participation in class activities by student auditors will be solely at the discretion of the instructor, who may provide a written statement of how much participation is allowed beyond observation.

B. Payment of a fee of $15 per unit. This fee is not covered by Financial Aid. The fee is not refundable. The course cannot be dropped for a refund. Students enrolled in classes to receive credit for ten or more semester units shall not be charged a fee to audit three or fewer semester units per semester.

C. No student auditing a course shall be permitted to change his/her enrollment in that course to receive credit for the course.

D. Priority in class enrollment shall be given to students desiring to take the course for credit.

E. The course will not appear on the student's transcript.

F. Students may not change enrollment from credit to audit to avoid a W or fee for the class. If a student is enrolled in the course for credit, the change must be made before the last day to drop the class without a fee. For Summer and Winter, this is within the first 3 days of the term. For Fall and Spring 16 week classes, this is within the first 10 days of the term. For Fall and Spring 8 week classes this is within the first 5 days of the term.

G. To request permission to audit, the student must visit the instructor at the next class meeting and obtain the instructor's signature on this form and a permission number to acknowledge and approve the audit enrollment. The form must then be submitted to Admissions and Records for processing.

STUDENT'S VERIFICATION: I understand and accept the above mentioned conditions for audit enrollment.

_____ _____

Last First Student ID Number

COURSE INFORMATION: Course Name: _____ 5-digit Course Number: _____

Permission Number from Instructor: _____

Student Signature_____ Date_____

INSTRUCTOR'S VERIFICATION: I understand and approve audit enrollment for the student above.

Instructor Signature_____ Date_____

ADMISSIONS AND RECORDS OFFICE: A&R Staff Processing By: _____Date_____