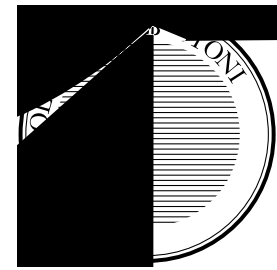


The Graduate School of Arts & Sciences



Change Course to Audit

Today's date: _____

Eagle ID #: —

Full Name: _____

Course # : Course Title: _____

Instructor's Approval: _____

Dean's Approval: _____

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GSAS Date Received:

Course UIS AY Date:

Rcvd by GSAS:

Recorder's Initials: