Itasca Community College
Audit/Visitor Grading Option

Name:_____________________________________________________
Please Print

Student Number: _______________________

Semester and year: _____________________

Audit grade option to be applied to: ___________________________
Course subject and number

Students requesting to audit a class pay regular tuition but are not required to complete assignments or examinations. No credit is earned when a course is audited and there is no impact on the student’s grade point average.

_______________________________________       ________________
Student Signature       Date

________________________________________________________________________
Instructor Signature       Date

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FOR OFFICE USE ONLY:

Date Processed: _________________________

Authorized Signature: ____________________________

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