Audit Form for Alumnae/i

Name: _____________________________________________________________

First    Maiden    Last

Address: ________________________________________________________________________________

E-mail address: ________________________________

Telephone: (     ) ___-_____

Date of Birth: ___/___/_____

Year of Graduation: ______

Program: Undergraduate___   Graduate___

Course Title: _____________________________________________________________________________

Professor: __________________________

Department in which course is offered: _____________________________________________________________________________

Semester: Fall___ Spring ___ Summer I ___ Summer II ___

Auditing Procedure:

1. Request the professor’s permission to audit the course via e-mail.
2. Complete this form.
3. Forward professor’s consent and return this completed form to the Office of Alumnae/i Relations, either in person, via e-mail, or via fax.
4. Mail a check made payable to Simmons College to the Office of Alumnae/i Relations ($250 for undergraduate courses; graduate course fees vary - inquire via alumnet@simmons.edu or 800.246.0573).

Please note:

- No record of alumnae/i auditing a course will be kept by the Registrar or the instructor.
- Alumnae/i may only audit courses in the school from which they graduated.
- Alumnae/i may not audit courses from another college in The Colleges of the Fenway.
- Alumnae/i may not change from auditing a course to taking a course for credit.
- Audit fees are nonrefundable.