# School of the Arts, Media, Performance and Design Course Audit Contract Form

**CONDITIONS OF AUDIT**

1. There is a fee of $30.00 per credit for theory courses. The fee for studio courses is $203.93 per credit. Payment of fees must be made by certified cheque, or money order made payable to York University. Please return a copy of this form along with fees payment to:

<Person>

<Department>

<Address>

The above auditing fee **does not** include any associated material fees.

1. Written approval of both the course director and the Chair of the Department is required in order to audit a course. A prior interview with the course director or with the Chair of the Department is normally required.
2. Auditors are admitted to classes on the understanding that they may attend and participate in discussion, but are not required to do assignments and are not entitled to essay, examination, critical or performance assessment. A final grade is not assigned in courses taken and no transcript or certificate of attendance is provided.
3. To be eligible, applicants must either have met the normal academic requirements, or be twenty-one years of age by the first day of classes and have been out of school for at least one year. As well, applicants must have a recognized facility in the English language.
4. a) Auditing will be subject to the availability of space.

**b) Because of the nature of the courses, auditors are not normally accepted into studio courses.**

c)Auditing upper-level courses would depend upon qualifications.

1. This application must be submitted to the department prior to the last enrolment date (without the course instructor’s permission) as outlined in the undergraduate lecture schedule.

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Surname \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Given Name(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ADDRESS:**

Apt. No.: \_\_\_\_\_\_\_\_\_\_ Number/Street: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/Town: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Province/Country: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Postal Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone Home: (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**REQUESTED COURSES:**

 Session Term Subject Course No. Section Catalog Number Credits Amount Paid

1. \_\_\_\_\_\_ \_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_

2. \_\_\_\_\_\_ \_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_

3. \_\_\_\_\_\_ \_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_

Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approval of Course Director: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approval of Department (Chair or designate): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_



8/12/2019