

Yale College

Request to Audit Undergraduate Courses [i.e., #100-499]

[Please contact the Graduate or Professional Registrar for courses taught in those schools.]

You must complete this form if you are in one of these four categories:

1. **Alumni and their spouses**, pending verification of Yale alumni status.
2. **Employees of the University and their spouses**, in accordance with applicable personnel policies.
3. **Spouses of full-time Yale faculty members or of emeritus faculty**.
4. **Spouses of postdoctoral associates and fellows, or of students enrolled full-time in the University**.

No form is required for **current and emeritus faculty** or **full-time Yale students**.

For full eligibility guidelines, please see [section K](#) of the *Yale College Programs of Study*. Alumni and their spouses pay an auditing fee; other qualifying auditors will not be charged a fee to auditor but are responsible for any other course-based charges.

Please select your category:

☐ Alumni

☐ Employee

☐ Faculty Spouse

☐ Alumni Spouse

☐ Employee Spouse

☐ Post Doc Assoc./Fellow/Student Spouse

Auditor's Name _____

Email _____

Address _____

Telephone _____

Course Title _____

Course# (e.g., HIST 123) _____

I have read the [relevant Yale College regulations](#) and understand that I am responsible for any additional course-based fees. I also understand that while the Office of Academic Affairs will grant access to the Canvas course site, and *may* grant, if permissible, access to the library collections, the Office cannot provide other resources, including (but not limited to): internet access; Yale NetIDs or databases requiring a Yale NetID; VPN; building access; Yale Orbis; Zoo computer labs; etc.

Auditor's Signature

Date

The above-signed has my permission to audit my course. I understand that the Office of Academic Affairs will provide Canvas access to auditors but cannot provide access to other resources, such as those requiring Yale NetIDs or VPN access (e.g., databases, Orbis, Zoo computer lab). If possible, I will provide course resources directly to the auditor.

Instructor's Signature

Date

Yale Employees Only: Please obtain your supervisor's signature:

This employee has my permission to audit the above course and will arrange their work schedule accordingly.

Supervisor's Signature

Date

Please email your completed form(s) to academic.affairs@yale.edu