
Student Name _____ Banner ID Number _____ Date _____

COURSE(S) TO BE AUDITED

Course Number	Course Title	Section	Instructor	Credits
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Course Number	Course Title	Section	Instructor	Credits
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Course Number	Course Title	Section	Instructor	Credits
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Student Signature _____ Date _____

Advisor Signature _____ Date _____

Instructor Signature _____ Date _____