

AUDIT STUDY APPLICATION FORM

FACULTY OF SCIENCES



PLEASE COMPLETE IN BLOCK LETTERS.

TITLE (Dr/Mr/Mrs/Miss/Ms/Other): _____

SURNAME: _____

GIVENNAME: _____

ADDRESS: _____

EMAIL: _____

POST CODE: _____

PHONE (Home): _____ PHONE (Work): _____

COURSE NAME	SEMESTER	COURSE COORDINATOR	COURSE COORDINATOR'S APPROVAL

STUDENT'S SIGNATURE: _____ DATE: _____

Please post this form and full payment to:

Faculty of Sciences Office
Ground Floor Darling Building
University of Adelaide SA 5005

All cheques should be made payable to "University of Adelaide".

Cash payments may be made in person at the Faculty Office, Ground Floor, Darling Building, North Terrace Campus.

Credit card payment **CANNOT** be accepted.

CONDITIONS

Approval by the course coordinator authorises attendance at lectures **ONLY**.

The fee for audit study is \$95 per semester-long course. Information regarding lecture times and venues will be provided by the course coordinator (or their delegate).

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Faculty Office Use Only		
Payment Received: \$	Signature:	Date:
Course Coordinator notified: Yes / No	Signature	Date: