



Student information:

- Name _____
- MSU ID # _____
- Phone _____
- Email _____

Course information:

Dept & Course #	Class #	Course Title	Credits	Term

NOTE: Please do not attend class until you have been notified by the Center for Extended Learning that instructor permission has been given.

I understand that I will be allowed to audit this/these course(s) on a space available basis and at the discretion of the instructor. Course-related fees, such as lab or materials fees, are my responsibility. No credit is awarded for this/these course(s).

Signature of Student: _____ Date: _____

Return form to Kari Schmidt, Center for Extended Learning, Administration Building 366B

Contact Kari Schmidt at 701-858-3990 or kari.schmidt@minotstateu.edu with any questions.

FOR MINOT STATE UNIVERSITY'S USE ONLY

Eligibility Verified (indicate means) _____ Date: _____
Copy of Government-issued ID attached.

Application Received by Admissions Office Date: _____

Application Fee Received Date: _____

Instructor Approval Obtained Date: _____

Student Enrolled in Course(s) Date: _____

Confirmation sent to Student Date: _____

Confirmation to Instructor Date: _____

Copy to Business Office Date: _____