SUMMARY OF AUDITOR PROCEDURES

1. Complete application and the audit form found below.

2. The student submits the completed application and form. *Please make sure to obtain faculty permission signature before returning form to the Office of Academic Formation and Programs, address below.

   Office of Academic Formation and Programs
   Duke Divinity School
   108 Gray
   Box 90968
   Durham, NC 27708

3. The Office of Academic Formation and Programs will ensure the student is manually enrolled as an auditor in the designated course.

4. The Student will receive a NET ID at the email provided on their application, allowing her/him access to Sakai (online database where professors distribute course materials) as well as resources in the library.

5. The auditing student will be billed for the $650 audit fee or may pay the fee by contacting the bursar office of Duke University (finance.duke.edu/bursar). Students with questions about billing should contact the Divinity office of Financial Aid, email Lenore Budget at lbudget@div.duke.edu

   If the auditing student withdraws after drop/add period, no amount of the $650 fee will be reimbursed.

   Note: Auditors are exempt from payment of student health fees unless they elect to use student health services while enrolled as an auditor. Also, auditors will not normally carry university health and accident insurance unless they elect to do so. However, if an auditor takes 3 or more courses per semester, then both the student health services and insurance programs are required.
Auditor Application Form

FALL 201__ or SPRING 201__

Is this enrollment for more than 1 semester? Yes    No
If Yes, what date will your enrollment end? ________________________________________________

Name ___________________________________________ Last    First    Middle

Date of Birth ________________________________    Male    Female
Mo.  Day  Year

E-mail Address __________________________________________ (This is the contact your information will be sent to)

Local Address ______________________________________ Street or P.O. Box
City    State    Zip

Permanent Address __________________________________ (Where you can always be reached)
Street or P.O. Box
City    State    Zip

Telephone Number:____________________________________

Person to contact in case of emergency:

Name __________________________________________
Address: _________________________________________
Phone #: _________________________________________

Institution Last Attended:

College/University    Degree Received    Date Degree Received

Denomination (Full Name) __________________________________

Information on ethnic origin is requested to enable the University to compile statistical information for reports required by the Office of Education, Department of Health, Education, and Welfare. This information will not be made a part of your permanent record.

Hispanic Latino (a) Yes    No    Other ethnicity (Please check all that apply)

White    American Indian or Alaska Native    Black    Asian

Native Hawaiian or other Pacific Islander    Prefer not to indicate

International (Country) ______________________________

Do you have health insurance? ____Yes    ____No

If yes: your policy is underwritten by ________________________________________________________
local carrier/administrator______________________________________________________________

Which Divinity School course(s) do you wish to audit this semester & what is your reason(s) (use back of sheet if necessary?)

Revised September 19, 2017
AUDIT FORM Fall 2017

All completed forms must be submitted to:
The Office of Academic Formation and Programs - 108 Gray

Student Name (please print):________________________________________________

Course to Audit: ____________________
[Course Subject]
(ex: PARISH, XTIANTHE, CHURMIN etc.)
________
[Course Number]
(ex: 701, 820, 999 etc.)
________
[Course section]
(ex: 01, 05, etc.)

Student Signature:_______________________________ Date:__________________

Signature of Instructor:______________________________ Date:__________________

Note: Full-time students: (those taking 3 or more classes) are able to audit courses for free. Part-time students: (those taking 1 or 2 classes) will be charged a $650 audit fee per course.

Reminder: drop/add for the Fall 2017 semester ends on September 8, 2017 at 5:00pm. This form must be turned in before this deadline.