



**DEPARTMENT OF HISPANIC STUDIES
TEXAS A&M UNIVERSITY
AUDITING REQUEST**

Name: _____

UIN: _____

Date Submitted: _____

Course Prefix and Number: _____

Year: _____

Classroom: _____

Semester: _____

Instructor: _____

Purpose/reason for auditing class

If you are not a currently enrolled student, please verify that you belong to one of the groups allowed to audit per the Texas Education Code (Sec. 54.365) such as senior citizens.

_____ Yes, I am a senior citizen _____ No, I am not a senior citizen.

Please sign to signify that you understand that as an auditor you must remain silent in the classroom and do not expect to participate or hand in work for grading.

Auditor's Signature

Instructor's approval

Director of Undergraduate Studies

Department Head

Once completed please return to Rosalinda Aregullín, Ph.D., Undergraduate Academic Advisor, Department of Hispanic Studies, 205 Academic Building, 4238 TAMU.