

Admission To Take A Class: AUDIT ONLY

No application fee required, Please type or print if not using the fillable form.

I wish to apply for admission at Washington State University (WSU) for the following semester to audit all classes:

(check one) Fall Spring Year 20_____

I am auditing as:

Senior Citizen: Attach the completed Senior Citizen Tuition Waiver Request form.

NOTE: Must be a resident of Washington

All Others: Attach the completed Enrollment Change form.

NOTE: Audit Only students pay a registration fee per audit hour.

Legal Name _____ Date of Birth: _____
Last, First, Initial *mm/dd/yy*

Former Name(s): _____ Male Female

Mailing Address: _____ County: _____
Street, City, State, Zip

Permanent Address: _____ County: _____
List only if different from Mailing Address

Phone Number: _____ Email Address: _____

RESIDENCY:

Resident of Washington? No Yes

Dates of most recent physical residence in WA: start: _____ to: _____
mm/dd/yy

I certify that, to the best of my knowledge, all statements I have made in this application are complete and true. By typing my name in the signature box, I certify that this is my digital signature.

Signature _____ Date _____
mm/dd/yy

(Program "Non Degree" Plan "Audit Only".)

Revised: August, 2021