

## Section I: Student

Student name: \_\_\_\_\_ NSU ID: N \_\_\_\_\_

Student email: \_\_\_\_\_ Telephone number: \_\_\_\_\_

Reason for audit request: \_\_\_\_\_

Health Professions Division (HPD) Student:  Yes  No

Course Ref. No.	Subject	Course No.	Section	Course Title	Term and Year

I assume responsibility for all audit course rules listed on the registrar's website and understand that I will not receive any academic credit or financial aid for this course. The course will be listed on my transcript with a grade of "AU".

Student Signature:\* \_\_\_\_\_ Date: \_\_\_\_\_

## Section II: Instructor

Instructor Name: \_\_\_\_\_ email: \_\_\_\_\_

Instructor Signature:\* \_\_\_\_\_ Date: \_\_\_\_\_

**I give permission for the above student to audit my class.**  Yes  No

## Section III: Department Chair/Director

Department Chair/Director Name: \_\_\_\_\_ email: \_\_\_\_\_

Department Chair/Director Signature:\* \_\_\_\_\_ Date: \_\_\_\_\_

**I give permission for the above student to audit this class.**  Yes  No

If approval is granted, please submit along with completed Student Transaction Form below to [regops@nova.edu](mailto:regops@nova.edu).

## Section IV: Registrar's Office

Date received: \_\_\_\_\_ Date processed: \_\_\_\_\_ Printed Name: \_\_\_\_\_

Signature:\* \_\_\_\_\_

# Student Transaction Form

(one semester per form only)



Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

NSU ID \_\_\_\_\_ Phone Number \_\_\_\_\_ Semester \_\_\_\_\_

This form is ONLY to be used for registration or withdrawal requests that cannot be completed in real time through SharkLink or Self-Service Banner, for instance, after the drop/add period has passed. **Please note that all students registering for classes MUST complete a Student Enrollment Agreement (SEA) each academic year.** Registration will not be completed until the SEA has been submitted online. To complete the SEA, follow the steps below:

Login to **SharkLink** ▶ click the **Academics** tab ▶ in the Useful Links section, click **Registration-Add/Drop/SEA**

Allow three business days for your request to display on your student record. However, requests submitted will not be processed if you fail to complete the SEA.

## Courses to Add

Course Ref. No.	Subject	Couse No.	Section	Course Title	Start Date/End Date	Cr. Hrs.

## Courses to Drop or Withdraw

Course Ref. No.	Subject	Couse No.	Section	Course Title	Start Date/End Date	Cr. Hrs.	Last Date of Attendance Office Use Only

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

Academic Advisor Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Extension \_\_\_\_\_ Date \_\_\_\_\_

Office Use Only	
Processed by _____	Date _____

This form may be signed electronically. For instructions, view [How to Insert E-Signatures](#).