## Pitt Public Health Grade Option/Audit Request

Please complete form and make sure that the information is complete and accurate. Email a copy of this form to Pitt Public Health Office of Student Affairs at <a href="mailto:student-student

| Student's Name   | PeopleSoft ID #               |
|--|-------------------------------|
| Student's Primary Academic Center  |                               |
| Course Title   |                               |
| CRN # Subject  | Course # Term (4-digits)      |
| Academic Center Offering Course  |                               |
| Complete this section to select a grade option:  1. Verify with the instructor that the grade option you se 2. Consult your advisor before requesting a grade option |                               |
| Grade Options (select only one)  | Student's signature & Date    |
| ☐ S/NC (satisfactory/no credit) ☐ LG/H/S/U (honors/satisfactory/unsatisfact  |                               |
|  | Advisor's signature & Date    |
|  | Instructor's signature & Date |
| Complete this section to select an <u>audit grade</u> :  |                               |
| Audit  | Student's signature & Date    |
| <ul> <li>Yes, I am choosing to audit the class<br/>referenced above.</li> </ul>  | Instructor's signature & Date |
|  | Advisor's signature & Date    |

