

GEORGE MASON UNIVERSITY ANTONIN SCALIA LAW SCHOOL

REQUEST TO AUDIT COURSE

RECORDS OFFICE

PHONE: 703-993-8015 FAX: 703-993-8019 EMAIL: lwrecord@gmu.edu

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Student Name:

G-Number:

Phone Number:

E-mail:

Semester: Spring

Summer

Fall

Degree: JD

LLM

JM

Visitor

Class level: 1D

1E

2D

2E

3D

3E

4E

Course Name:

Course Number:

CRN:

Reason for audit:

Student Signature:

Professor Signature:

**Approver for JD:**

Annamaria Niels, Associate Dean, Academic Administration and Academic Affairs Signature:

Date:

**Approver for LLM/ JM:**

Charles Lemley, Director of Graduate Student Academic Affairs:

Date: