



# Martin Luther College Records Office Audit to Credit Form

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

I wish to change \_\_\_\_\_  
Course Number Course Title

from audit to credit. I realize that this change must be completed within the first two weeks that the course is in session.

\_\_\_\_\_  
Signature of Student Date

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I grant permission to the student to take the above course for credit.

\_\_\_\_\_  
Signature of Instructor Date Signature of Advisor Date

\_\_\_\_\_  
Records Office Date