

Jefferson Community College

Course Audit Information

Students have the privilege of auditing a course from the College, for no credit, per the guidelines below.

Course Audit Guidelines

1. Students will be allowed to audit eligible classes. Classes not eligible for auditing include online, hybrid, distance learning and internship classes.
2. Course auditors must receive consent of the instructor and will be allowed only into classes that have not reached maximum enrollment.
3. Course auditors will not be required to submit assignments or take exams. Instructors will not grade assignments or tests.
4. After the second week of class, a student that has elected to audit a course may not subsequently request credit for the course.

Tuition and Fees for Course Audits

1. Students under age 60 wishing to audit a course will be charged 1/3 of the normal tuition plus full fees.
2. Student 60 years of age and older wishing to audit a course will not be charged for tuition or fees.

Course Audit Registration Procedures

1. Students wishing to audit a course must complete the course audit registration form (attached) and contact the instructor for permission to audit.
2. If instructor approval has been received and seats are available, the student may attend the first week of class.
3. At the end of the first week of classes, if seats remain available, the student should return the Course Audit Registration form to the Advising, Career, and Transfer Center (ACT) to process the registration as an auditing student.
4. Please note that final approval to audit a course cannot be given until after the registration period for all credit bearing students has closed. (the end of the first week of classes or the equivalent for abbreviated terms)

Jefferson Community College

COURSE AUDIT REGISTRATION FORM

Spring 20__ Summer 20__ Fall 20__ Winter 20__

Program of Study: _____ or Not Seeking Degree (circle)

Student Identification Number/SSN Gender

_____-_____-_____-_____-_____-_____-_____-_____-_____-_____-_____-_____-
 Male Female

Current Legal Name Date of Birth

_____-_____-_____-_____-_____-_____-_____-_____-_____-_____-_____-_____-
 Last First MI Month Day Year

Previous Name (if applicable) Email address

_____-_____-_____-_____-_____-_____-_____-_____-_____-_____-_____-_____-
 Last First MI

Current Address

_____-_____-_____-_____-_____-_____-_____-_____-_____-_____-_____-_____-
 Street County

 City State Zip Code Home Telephone Number

 Cell Phone Number Business Telephone Number

Home of Record (If military)

_____-_____-_____-_____-_____-_____-_____-_____-_____-_____-_____-_____-
 Street County

 City State Zip Code

High School Data: Please check one.

- I graduated from _____ in _____.
 High School Year
 The school city/state is: _____.
- I received a GED (equivalency Diploma) from the
 State of _____ in the year _____.
- I am not a high school graduate or GED holder since
 I am still enrolled at _____
 with an expected graduation date of _____.
- I am not a high school graduate or GED holder.

College Education History:

- New:** I have never attended JCC or any other college.
- Continuing:** I was in attendance at JCC last semester.
- High School:** I have attended or am attending JCC while in high school.
- Returning:** I have attended JCC in the past taking credit courses, but I was not enrolled last term.
- Transfer:** I have never attended JCC, but I have attended a
 degree-granting College/University: Enter data below.

Academic transcripts are required for all colleges which you have attended or from which you have received (or will receive) credit.

College Name	City, State	Attendance Date	Degree Earned

Course to Be Audited

CRN	Course	Days	Times

I am requesting permission to audit the above course and agree to the course audit policies and guidelines.

Student Signature: _____ **Date:** _____

This student has my permission to audit the above course:

Instructor Signature: _____ **Date:** _____

The above course is audit eligible and has seats available at the close of the registration period;

ACCC Director Signature: _____ **Date:** _____

- Student is under age 60 and will be charged 1/3 tuition and full fees
- Student qualifies for senior citizen audit and will not be charged any tuition or fees

Census Data

Federal, state and local laws mandate that the information requested below be filled out completely to provide statistics for the federal and local agencies.

Those statistics impact our funding.

Citizenship

- U.S. Citizen
- Resident Alien (green card)
- Refugee/Asylum

Hispanic Origin

- Non-Hispanic
- Dominican
- Mexican
- Puerto Rican
- Central American
- South American
- Other Hispanic/Latino
- Unknown

Ethnicity

- White
- Black or African American
- Asian
- Native Hawaiian or Other Pacific Islander
- American Indian or Alaska Native

Military Affiliation (if applicable)

- Active-duty
- Veteran
- Reservist
- Family member/dependent

Plans for employment during the semester

- Not employed
- Employed full-time
- Employed part-time (20 hours or more)
- Employed part-time (les than 20 hours)

International Students

Visa Type _____

Country of Citizenship _____

Language you feel most comfortable with

- English
- Spanish
- Other

Disability

- None
- Wheelchair
- Impaired Mobility/Assistive Device
- Impaired Mobility/No Assistive Device
- Other Orthopedic Impairment
- Blind
- Not Blind but Impaired Vision
- Deaf
- Impaired Hearing
- Learning Disability
- Emotional Disorder
- Speech Impairment
- Acquired Brain Injury
- Other Health Impairment
- Prefer Not to Answer

Primary Objective at JCC (choose one)

- Transfer to another SUNY college after earning a degree.
- Transfer to a non-SUNY college after earning a degree.
- Transfer to a SUNY college without earning a degree.
- Transfer to a non-SUNY college without earning a degree.
- Earn a degree/certificate and seek employment.
- Learn new skills or upgrade existing skills without earning a degree.
- Seek enrichment rather than pursue a degree/certificate.
- Obtain a Certification of General Education Development (GED)
- Uncertain
- Other: _____

Current Education Level

- Less than high school diploma
- GED
- High School diploma
- Attended college after high school
- Associate's degree
- Bachelor's degree
- Master's degree or higher

First Generation College Student Survey

Did either of your parents graduate from a college or univeristy with a bachelor's (4-year) degree?

- yes
- no

Perkins Grant Program Survey

New Students Only

To comply with reporting requirements under the Perkins grant program, the College requests you answer the following question. The information is confidential, for reporting numerical statistics only. The information is NOT used to determine eligibility for admission, enrollment or registration.

Are you unemployed or underemployed and experiencing difficulty in obtaining or upgrading employment?

- yes
- no

If yes, please indicate if either of the following items applies to you.

You have worked primarily without pay to care for a home and family and for that reason you have diminished marketable skills and you have been dependent on the income of another family member but are no longer supported by such income.

- yes
- no

You are a parent whose youngest dependent child will become eligible to receive assistance under Part A of Title V of the Social Security Act not later than two years after the date on which the parent applies for assistance under this Title.

- yes
- no

For Office Use Only:
Received Advising: _____
Processed Advising: _____
Processed Registrar: _____