



Office of the Registrar/Student Records
Room 2027
(919)613-7027
Registrar_Office@law.duke.edu

PERMISSION TO AUDIT DUKE LAW COURSE
(for use by Duke Law Students)

Student (print name): _____

Student ID #: _____ Semester (circle and complete): Fall / Spring 20_____

Course No.	Course Title	Instructor's Name

Signature of Instructor (required)

Date

Signature of Assistant Dean of Academic Affairs

Date

**After obtaining the proper signatures, please return this form
to the Law School Registrar's Office, Room 2027.**