



HARVARD | BUSINESS | SCHOOL

HBS Cross-Registration Audit Form

The deadline to change to auditor status is Friday, February 11th.

LAST NAME: _____ FIRST NAME: _____

I would like to switch to auditor status for the following course(s).

1) COURSE NUMBER WITH SECTION: _____ - _____

Course Name: _____

Faculty Signature _____

2) COURSE NUMBER WITH SECTION: _____ - _____

Course Name: _____

Faculty Signature _____

STUDENT SIGNATURE: _____

DATE (required): ____/____/____