

**You only need to fill out this form if you plan to register in-person (bring completed form with you) or by mail.**

**Mailed forms for will not be processed until  
Friday, January 15, 2010, after 3 p.m.**



**Application Form**  
All Information Kept Confidential

**Community Auditing Program (CAP)**

**Spring 2010**

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Name: \_\_\_\_\_  
Please Print Last First MI

Address: \_\_\_\_\_  
\_\_\_\_\_  
City State Zip Code

Home Telephone: (\_\_\_\_\_) \_\_\_\_\_  
Required

Office Telephone: (\_\_\_\_\_) \_\_\_\_\_ ext. \_\_\_\_\_

E-mail: \_\_\_\_\_

Princeton Borough/Township Resident? ..... YES NO  
Circle One

Have you registered for CAP before? ..... YES NO  
Circle one

**Course Selection:**

How many courses do you wish to audit? \_\_\_\_\_ @ \$125.00 per course, per semester  
Required

*Cash, Check or Charge – Make Check Payable to Princeton University (cash in-person only)*

**Course selections must be listed in order of preference**

	Department	Course Number	Course Title	Days	Time
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					

**All refund requests must be in writing – No Refunds After Friday, February 12, 2010**

*Please check if applicable*

**Princeton University:**  
 \_\_\_\_ alumnus(a) \_\_\_\_yr.  
 \_\_\_\_ current faculty/staff  
 \_\_\_\_ retired faculty/staff  
 \_\_\_\_ parent of Student \_\_\_\_yr.

**Spouse of:**  
 \_\_\_\_ alumnus(a) \_\_\_\_yr.  
 \_\_\_\_ faculty/staff  
 \_\_\_\_ retired faculty/staff  
 \_\_\_\_ graduate student