DATE:



BME 020 – COURSE EXEMPTION FORM

Request to have an undergraduate course graduate course exemption. Surname: _____ Given Name: _____ Student No.: Supervisor: **COURSES** (please fill in the following information and have the instructor sign: Course Number Course Number (Undergrad) (Undergrad) Equivalent Course Equivalent Course (if applicable) (if applicable) Grade Received Grade Received Instructor: Instructor: Instructor's Signature Instructor certifies that the student has met the graduate level requirements of this course. STUDENT'S SIGNATURE: _____ PROGRAM APPROVALS:

Students taking courses that are cross-listed as graduate courses for undergraduate credits have to provide evidence that they have completed the requirements at the graduate level. Students should, of course, make the instructor aware at the beginning of the term which version of the course they are taking.

GRADUATE CHAIR: _____