

Fostering Leadership & Innovation

REQUEST FOR EXEMPTION/ADVANCED STANDING

SECTION 1: STU	JDENT AND CONTACT INFORMATION	SECTION 2: PROGRAMME INFORMATION
*FIRST NAME *MIDDLE NAME(S) *LAST NAME *I.D. # CAMPUS ATTENDED PHONE	UCC EMAIL	PROGRAMME REGISTERED: GROUP NAME ENTRY DATE mm dd yyyy PETITION DATE mm dd yyyy
Have you received exemption from UCC previously?		
SECTION 3: PRO	OGRAMME RECORDS	
PREVIO	US CERTIFICATE / DIPLOMA / DEGREE YEAR GRANTED INSTIT	JTION ATTENDED
	FOR OF	FICIAL USE ONLY
UCC COURSE AND COURS	E CODE PETITIONED SUBSTITUTE COURSE FROM PREVIOUS INSTITUTION(S) GRADE(S) YEAR SUBSTITUTE TAKEN DECISION	COMMENTS (Give reason(s) why exemption is not granted)
COMPLETED BY DATE # OF EXCEPTIONS REQUESTED		
APPROVED BY	SIGNATURE mm / dd / yyyy	
NAM		GRANTED # NOT GRANTED

REGA# 07-10-01-200