REQUEST FOR EXEMPTION
FROM EPID 710

Date: ______________

From: _________________________________________

Student’s Name

Degree Program (check one): _____MPH    _____MSPH
_______PhD

Equivalent work being offered as basis for exemption- please provide details including, if applicable, course name, institution where course taken, grade received, details of work experience, etc. Attach course syllabus or other documentation as appropriate.

I understand that exemption from the EPID 710 prerequisite for EPID 715 does not relieve me of the responsibility for knowing the material covered in EPID 710 and its required textbook, Rothman’s *Epidemiology: An Introduction*.

_______________________________
Student’s Signature

APPROVALS:

Advisor: ____________________________     __________
                      Signature               Date

EPID 710 Instructor: ____________________________     __________
                      Signature               Date

EPID 715 Instructor: ____________________________     __________
                      Signature               Date

Submit to Jennifer Moore, Student Services Office, MC 2106, for signatures.