DEPARTMENT OF EPIDEMIOLOGY
COURSE EXEMPTION/SUBSTITUTION FORM
[Not to be used for EPID 710 exemption requests]

_______________________________________________         ______________________
Student's Name                                                  Major Department

UNC Course to be Substituted:  _____________________________________________

Basis for Substitution (please check one below):

_____ Equivalent Course (request must include: course description and/or syllabus;
copy of transcript; copy of table of contents of textbook used, if any)

Title of Course:  __________________________________________________
Institution:  ______________________________________________________
Course grade: ______________________

_____ Equivalent Experience (attach detailed description of experience, including
relevant titles, institutions/organizations, and dates)

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REQUIRED SIGNATURES                                           DATE

______________________________________________________________     ______________________
Major Advisor                                                  Date

______________________________________________________________     ______________________
Course Instructor                                              Date

Submit to EPID Student Services Office, MC 2106, or epidemiology@unc.edu for signatures.