### COLLEGE OF WILLIAM AND MARY

SCHOOL OF MARINE SCIENCE / VIRGINIA INSTITUTE OF MARINE SCIENCE

# **APPLICATION FOR SMS CORE COURSE EXEMPTION**

#### NOTE: THIS FORM IS NOT APPLICABLE TO MSCI 503, WHICH IS REQUIRED OF ALL STUDENTS.

#### PRIOR TO CONSULTING THE CORE INSTRUCTOR(S), PLEASE ATTACH TO THIS APPLICATION: A COURSE SYLLABUS AND STUDENT TRANSCRIPT SHOWING GRADE AND CREDIT-HOURS OF STUDENT'S PRIOR COURSEWORK FOR EACH EXEMPTION REQUESTED BELOW.

#### STUDENT INFORMATION:

LAST NAME	FIRST NAME	M.I.	BANNER ID	Degree Program	
TERM & YEAR OF ENTRY	Major Advisor / Co-Advisor Na	ME(S)	DEPARTMENT		

I REQUEST AN EXEMPTION FROM THE FOLLOWING COURSE(S) BASED UPON PREVIOUS STUDY IDENTIFIED BELOW. I ALSO UNDERSTAND THE CREDITS FOR EXEMPTED COURSES WILL NOT BE TRANSFERRED TO MY STUDENT RECORD UNTIL I SUBMIT AN APPLICATION FOR TRANSFER OF CREDIT.

STUDENT SIGNATURE DATE CORE COURSE EXEMPTION REQUEST #1										
MSCI Course No.	MSCI SECTION NO.	COURS	COURSE TITLE					COURSE INSTRUCTOR NAME(S)		
BASED UPON THE PREVIOUS STUDY										
COURSE NO.	SECTION NO.	TITLE		INSTITUTION			SEMESTER AND YEAR TAKEN	CREDIT HOURS	GRADE	
				MEMBER IS REC	QUIRED TO REV	VIEW AND PROVIDE COM	MENTS IN SUPPORT OF	APPROVAL O	R DENIAL	
SMS INSTRUCTOR SIGNATURE DATE				IMENDATION S <b>O</b> No	FACULTY REVIEWER'S	COMMENTS				
SMS CO-INSTRUCTOR SIGNATURE DATE			RECON O YES	IMENDATION S <b>O</b> No	FACULTY REVIEWER'S COMMENTS					

## **CORE COURSE EXEMPTION REQUEST #2**

MSCI COURSE NO.	MSCI SECTION NO.	COURSE TITLE					COURSE INSTRUCTOR NAME(S)		
BASED UPON THE PREVIOUS STUDY									
COURSE NO.	SECTION NO.	TITLE		INSTITUTION	J	SEMESTER AND YEAR TAKEN	CREDIT HOURS	GRADE	
CORE COURSE INSTRUCTOR RECOMMENDATION: IF THERE IS MORE THAN ONE INSTRUCTOR, EACH FACULTY MEMBER IS REQUIRED TO REVIEW AND PROVIDE COMMENTS IN SUPPORT OF APPROVAL OR DENIAL OF THIS APPLICATION.									
SMS INSTRUCTOR SIGNATURE DATE			DATE	RECOM O YES	MENDATION O No	FACULTY REVIEWER'S COMMENTS			
SMS CO-INSTRUCTOR SIGNATURE DATE			DATE	RECOM O YES	MENDATION O No	FACULTY REVIEWER'S COMMENTS			

#### NEXT STEP: PLEASE RETURN THIS FORM TO THE VIMS/SMS REGISTRAR, WATERMEN'S HALL 253 OR SUBMIT ELECTRONICALLY TO REGISTRAR@VIMS.EDU FOR ACTION AT THE NEXT SCHEDULED AS&DC MEETING.

Academic Status & Degrees Committee Recommendation:							
CHAIRPERSON, AS&DC	SIGNATURE	DATE	RECOMMENDATION O APPROVE O DENY				