Department of Chemistry and Biochemistry
REQUEST FOR LAB EXEMPTION

Section 1 – Contact information:
Family Names: ___________________________ Given Names: ______________________ ID: __________
Phone: ___________________________ E-mail: __________________________________________

Section 2 – Course in which lab was passed:
Course number: ___________ When taken: ___________
Course professor: ___________________________________ Lecture section: _______ Lab section: _______

Section 3 – Course for which exemption is requested:
Session: S F W (circle one) Requested lecture section: □
Preferred tutorial section, if appropriate*: □ 1st choice □ 2nd choice
*Not all courses have tutorials

If you are granted an exemption, you will be registered for the special exemption lab section after receiving permission. **If you remain registered in any other section, you will be required to repeat the labs.** Please consult the University Class Schedule for course-specific details.

Signature: ___________________________________ Date: ___________

Section 4: For office use only
Date Processed: __________________________
Mark for lab reports: □ □ Mark for lab exam, if appropriate: □ □
Course & lecture section: ___________ Special lab section: 56 Term & year: ___________
Signature: ________________________________

Instructions:
1. The student completes sections 1, 2 and 3 and take the form to the Department office, SP-201.01, or send it by e-mail to Lisa Montesano at chemistry.reception@concordia.ca.
2. The Department obtains the previous mark, and verifies that the student is eligible for the exemption.