



Application for Exemption Credit

Print clearly or type.

NOTE: If credit is granted, it will appear on your Academic History as Transfer Credit with a grade of "EX." Exemption credit is not used to calculate GPA but does satisfy graduation requirements. Exemption credit is not typically transferable to other institutions. You may not take an exemption test if you are enrolled in the course, if you have previously been enrolled in the course, or if you have previously attempted the exemption test.

Application Procedure

(A separate application is required for each exemption test)

1. Complete the top section of this application before registering for any course you plan to exempt (No later than the last day of drop/add).
2. Contact an instructor within the appropriate department to schedule the exemption test (Instructor will insert date, time, and location).
3. Take this application to the cashier's office and pay non-refundable exemption test fee (Cashier will attach payment confirmation).
4. Submit this application (With top three sections completed) to instructor on the date of the exemption test.

1. Student Completes this Section

Submit to Instructor designated to administer the exemption test.

Date: _____ NGTC Student ID #: _____

Name: _____
LAST FIRST MIDDLE OR MAIDEN

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Course # and Title: _____ Credit Hours: _____

For Example: COMP 1000, Introduction to Computers Credit Hours: 3

2. Instructor Completes this Section (Before test)

Enter exemption test schedule and return form to the STUDENT.

Exemption Test Schedule: Date: _____ Time: _____ ☐ AM ☐ PM

Exemption Test Location: Building: _____ Room: _____

3. Cashier Completes this Section

Staple payment receipt to this form and present to instructor at the time of the exemption test. **The non-refundable fee for an exemption test is 25% of the course tuition.**

Total Credit Hours for Course _____ x \$100 = _____ Course Tuition x 25% = _____ **Exemption Test Fee**

Date Paid: _____ Business Office Staff Member Receiving Payment: _____

4. Instructor Completes this Section (after test)

Submit signed, completed form to the Registrar's office.

I certify that this student ☐ HAS ☐ HAS NOT met the criteria for exemption of the listed course. Test Score: _____

Instructor's Signature: _____ Date: _____

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