

EXEMPTION FORM
Faculty of Social Sciences Utrecht University

Student no.

Full-time/Part-time
(Circle whichever applies)

Last name/Initials :
Programme :
Address :
Postcode/City :
Telephone no. :

Name of course :

Code Academic year Block

Programme: Bachelor 'Doctoral' Master (tick appropriate box)

No. of ECTS/credits _____

Exemption is granted on the basis of:

Standard regulations or Written exemption from course teacher (Enclose exemption note)

Have you previously received an exemption on the basis of the enclosed documents?

Yes / No (Circle whichever applies)

If so, for which course? _____

For how many credits? _____ ECTS/credits (Circle whichever applies)

Place: _____ Date: _____ Signature: _____

NB: Each request for exemption should be accompanied by written evidence, such as an exemption note signed by the course teacher, certified copies of diplomas and/or prospectuses.

(For office use only!!)

Approved by Board of Examiners/Admissions Committee

Name: _____ Date: _____

Signature: _____

NB This exemption is only valid if all registration requirements of the Central Student Administration of Utrecht University have been met.

You can send this form to Faculty of Social and Behavioural Sciences, OSZ-STIP, Padualaan 14, 3584 CH, Utrecht.