RUTGERS HEALTH

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# Health Science Careers Academy
# OFFICIAL GRADE EXCLUSION FORM

**ALL INFORMATION MUST BE SUBMITTED IN TYPED FORMAT OR CLEARLY WRITTEN FORMAT**

**Student Name:** _____ _____ _____
(First) (Middle Initial) (Last)

**High School:** _____ **Date of HS Grad:** _____

**DOB:** _____ **Email:** _____ **Tel #:** _____

## GRADE DATA AND EXEMPTION INFORMATION

| COURSE # | COURSE TITLE | CREDITS | EARNED GRADE | GRADE DECLINED | GUARDIAN AUTH/INIT | INSTRUCTOR INITIAL |
|---|---|---|---|---|---|---|
| | | | | | | |
| IDST-3010 | MEDICAL TERMINOLOGY | 3.00 | | . | | |
| IDST-2250 | DYNAMICS OF HEALTH CARE IN SOCIETY | 3.00 | | . | | |
| IDST-1221 | ANATOMY & PHYSIOLOGY I | 4.00 | | . | | |
| IDST-1222 | ANATOMY & PHYSIOLOGY II | 4.00 | | . | | |
| IDST-1100 | EMERGENCY & CLINICAL CARE | 2.00 | | . | | |
| DENH1220 | SCIENTIFIC PRINCIPLES OF NUTRITION | 3.00 | | . | | |
| DENH-1221 | NUTRITION & THE LIFESPAN | 3.00 | | . | | |
| IDST-1230 | FUNDAMENTALS OF HEALTH & WELLNESS | 3.00 | | . | | |
| IDST-3510 | PRINCIPLES OF SCIENTIFIC INQUIRIES | 3.00 | | . | | |

**NOTE: ALL GRADES C ( 73 % ) OR HIGHER WILL BE AUTOMATICALLY PROCESSED TO THE STUDENT'S RECORD UNLESS THE HSC PROGRAM RECEIVES THIS FORM WITH YOUR REQUESTED GRADE EXEMPTION.**

**Please exempt the DECLINED grades above from my student's official record.**

**Parents Initial:** _____

**Parent Signature:** _____ **Date:** _____

**If student is over the age of 18 years old, please sign below.**

**Student Name:** _____ **Date:** _____