LABORATORY EXEMPTION APPLICATION					
Lec Dep Item	turer/La artment as 7 & 8	TRUCTIONS: Items 1-6 are to be completed by the student and submitted to the arer/Lab Instructor named in item 5 or to the SST office or to the Head of Chemistry artment. 3 7 & 8 are to be completed by the Lecturer/Lab Instructor named in item 5 and passed on to lead of Department.			
•	1.	Student Name:			
	2.3.4.	Student Number: Name and number of course for which you are requesting lab exemption: In which semester did you most recently complete labs for this course?			
				5.	Give the name of your lab instructor.
				6.	Who is your current lecturer for this course?
		ne lab lecturer/instructor: Please complete items 7 & 8 return the form to the l of Department.			
	7.	This student obtained an average of% on his/her labs in semester			
	8.	Additional comments (if any)			
	H.P	Lab Lecturer's/Instructor's signature Date			
	9.	Head of Department comments			
		Head of Department Signature Date			

THE SCHOOL OF SCIENCES AND TECHNOLOGY