FIRST YEAR EXPERIENCE (FYE)

Student Exemption Form

Student Name: _____________________________ Student ID#: __________________

Phone (     ) ______ - _________ Email ________________________________

Date of Application: ____________________________________________________________________

Reason for Exception (check all that apply):

a. _______ Student has completed a credit-bearing AA, AS, or higher degree.
b. _______ Student has completed a minimum of 15 college-level credits with a GPA of
   2.5/4.0 or better at an accredited institution at the time of admission or
   readmission.
c. _______ Student has successfully completed the Three Rivers Community College Assessment
   of Prior Learning (APL) program.
d. _______ Student has transferred a minimum of 15 military/police academy credits.

Please document which course(s) will substitute for IDS 105 on the student’s Plan of Study:
_________________________________________________________________________________

<table>
<thead>
<tr>
<th>Course Number</th>
<th>Course Name</th>
</tr>
</thead>
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Please submit this form with attached documentation of proof for review to the FYE Program
Coordinator - Room D111G. If you have any questions please call (860) 215-9220 or email
jcalvert@threerivers.edu.

Approval Process:

1. Student Signature______________________________________________________________
   Date__________________________

2. Advisor Signature______________________________________________________________
   Date__________________________

3. FYE Program Coordinator Review
   Signature ________________________________________________________________
   Date__________________________

cc: Academic Advisor
    Registrar

OFFICE USE ONLY:

Updated January 14, 2015 JBC