



Pharmacy Prerequisite Exemption Request Form

Background: Our required pre-requisite courses have been chosen to ensure success in our PharmD program. However, not all institutions may offer these specific courses or may require other courses to be completed. Along the same lines, given that the healthcare field is evolving rapidly, foundational science coursework taken should be recent enough that it can be easily recalled and built upon.

Policy: In order to help students be successful in our PharmD program, courses in organic chemistry, biology, microbiology and anatomy/physiology that is not completed within seven years of entry into the Pharm.D. program must be requested for exemption. Similarly, coursework that does not match our specified pre-requisite requirements must be requested for exemption to the required courses. You may use this form to request the consideration of exceptions to the prerequisites (related to specific courses or time since completed) which will be reviewed by the Admissions Committee through the Office of Student Affairs.

Name: _____ Date: _____ E-mail: _____

Expected entry date to the PharmD program is Fall of: 2024 2025 2026 2027

Which chemistry pre-requisite course(s) are you requesting an exemption for?

<input type="checkbox"/> General Chemistry I Lec	<input type="checkbox"/> General Chemistry II Lec	<input type="checkbox"/> Organic Chemistry I Lec	<input type="checkbox"/> Organic Chemistry II Lec
<input type="checkbox"/> General Chemistry I Lab	<input type="checkbox"/> General Chemistry II Lab	<input type="checkbox"/> Organic Chemistry I Lab	<input type="checkbox"/> Organic Chemistry II Lab

If you are requesting a chemistry exemption, please list ALL Chemistry courses that you have completed:

Course Taken	Course Code & Number	College	Semester Hrs	Term/Year	Grade

Reason for requesting the exemption (i.e. specific pre-requisite course not offered at your institution, other course required for degree plan, etc):

If you are requesting a chemistry exemption, please list any Chemistry related work or volunteer experience you have:

Company Name	Position	Start Date	End Date	Duties

Which biology pre-requisite course(s) are you requesting an exemption for?

<input type="checkbox"/> Biology I Lec	<input type="checkbox"/> Biology II Lec	<input type="checkbox"/> A&P I Lec	<input type="checkbox"/> A&P II Lec	<input type="checkbox"/> Microbiology Lec
<input type="checkbox"/> Biology I Lab	<input type="checkbox"/> Biology II Lab	<input type="checkbox"/> A&P I Lab	<input type="checkbox"/> A&P II Lab	<input type="checkbox"/> Microbiology Lab

If you are requesting a biology course exemption, please list ALL Biology courses that you have completed:

Course Taken	Course Code & Number	College	Semester Hrs	Term/Year	Grade

Reason for requesting the exemption (i.e. specific pre-requisite course not offered at your institution, other course required for degree plan, etc):

If you are requesting a biology course exemption, please list any Biology related work or volunteer experience you have:

Company Name	Position	Start Date	End Date	Duties

Which other pre-requisite course(s) are you requesting an exemption for?

<input type="checkbox"/> Calculus I	<input type="checkbox"/> Fundamentals of Speech
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If you are requesting a Calculus or Speech course exemption, please list ALL Math or Communications related courses that you have completed:

Course Taken	Course Code & Number	College	Semester Hrs	Term/Year	Grade

Reason for requesting the exemption (i.e. specific pre-requisite course not offered at your institution, other course required for degree plan, etc):

What other information would you like the Admissions Committee to know when considering your exemption request?

Please list any Degree(s) you have:

College	Degree Type	Major	Graduation Date

Please e-mail the completed form along with unofficial copies of your transcripts to pharmacy@uttyler.edu.



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