



Appeal For One Exemption From Regents' Skills Course

Office of the Vice President for Academic Affairs
131 College Circle
Swainsboro, GA 30401

Phone: (478) 289-2031
Fax: (478) 289-2137

Date: _____ EGC Student ID: _____ EGC E-mail Address: _____

Name: _____
(Last) (First) (MI)

Address: _____
(Street) (City) (State) (Zip)

Phone #: (____) _____ Alt. Phone #: (____) _____

Applying for: _____ Spring _____ Summer _____ Fall Semester Year _____

Reason for Appeal: (Type your response in the box below)

*****Please attach additional pages if necessary. Be sure to put your name and student ID# on additional pages.***

Signature

Office Use Only			
Denied _____	Approved _____	Limitations _____	Stipulations _____