



Course Exemption Form DC to Undergraduate

Office of the Registrar
1269 Barclay Circle Marietta, GA 30060
(770)426-2700 Office (770)426-2872 Fax

Name _____

Student ID# _____

I request that the Registrar's office evaluate my transcript(s) for course equivalency for the following courses:

Course Name	DC Credits	Course Equivalent	UG Credits	Quarter Taken	Final Grade
ANAT 1502 Embryology	2	BIO 302	2		
ANAT 1503 Histology	4	BIO 303	4		
ANAT 1507 Osteology and Arthrology	3	BIO 307	3		
ANAT 1607 Spinal Anatomy	2	BIO 407	2		
ANAT 1615 Muscular Skeletal Gross Anatomy	4	BIO 515	4		
ANAT 1625 Visceral Gross Anatomy	4	BIO 525	4		
ANAT 2626 Head and Neck Gross Anatomy	4	BIO 526	4		
ANAT 2646 Neuroanatomy CNS	4	BIO 546	4		
ANAT 2647 Neuroanatomy PNS	4	BIO 547	4		
CHEM 1515 Biochemistry I	6	CHM 315	5		
CHEM 1516 Biochemistry II	5	CHM 316 or SHS 412	5		
CHPM 4763 Jurisprudence	3	SOC 563	3		
CHPM 4773 Ethics and Boundaries	3	SOC 573	2		
CPAP 1502 Medical Terminology	2	NTR 240	2		
CPAP 1605 Introduction to Chiropractic History	2	HUM 605	2		
FYEX 1101 First Year Seminar	0	FYE 101	0		
MICR 1531 Bacteriology and Virology	5	BIO 431	5		
MICR 2533 Parasitology and Mycology	3	BIO 433	3		
MICR 2537 Immunology and Disease Patterns	3	BIO 437	3		
PATH 2541 Pathology I	4	BIO 441	4		
PATH 2542 Pathology II	4	BIO 442	4		
PHYS 1501 Anatomy and Physiology	4	BIO 401	4		
PHYS 1510 Cellular and Neuromuscular Physiology	5	BIO 410	5		

PHYS 1525	Visceral Physiology	6	BIO 425	6		
PHYS 2535	Physiology Lab	3	BIO 435	3		
PHYS 2545	Endocrinology	4	BIO 445	4		
PSYC 3505	Human Development	2	PSY 505	2		
PSYC 3605	Clinical Psychology	3	PSY 605	3		
PUBH 1515 (3515)	Public and Environmental Health	2	BIO 415	2		
PUBH 1517	Basic Nutrition	5	BIO 517 or NTR 300	5 or 4		
PUBH 3617	Nutrition and Health	2	BIO 617	2		
RSCH 2501	Introduction to Research	2	HUM 501 or NTR 301	2		
RSCH 3601	Research Methods and Design	2	HUM 601	2		
RSCH 4801	Senior Case Presentation	1	HUM 611	1		
COMBO	RSCH 2501, 3601 & 4801 (all required)	5	SHS 380	5		

Registrar's Office Signature: _____ **Process Date:** _____