NURSING/HEALTH SCIENCES ALLIED HEALTH SCIENCES AHS 102 MEDICAL

TERMINOLOGY EXEMPTION NOTIFICATION FORM



Last Name	First Name	Middle	
Last Name	Filst Name	Middle	
Street Address (include apt. #)	City	State	Zip Code
Email Address		Student ID Number	
Home Phone Number		Date the AHS 102 Medical Terminology exemption test was taken on	
The score required to receive exemp	tion of AHS 102 Medical T	erminology is 80%.	
The score that I earned on the AHS 102 Med	dical Terminology exemption te	st	
Signature		Date	