UCF | **College of Graduate Studies**

Graduate Certificate Completion Form

In order to be processed for completion of a graduate certificate program, students must obtain formal acceptance into the graduate certificate program and file the Graduate Certificate Completion Form by the end of the add/drop period in the semester in which the student registers for the final course in the certificate program. Students must be registered in the semester they are completing the requirements for the certificate program.

PLEASE PRINT CLEARLY

STUDENT INFORMATION

Family or Last Name _____ First Name _____

Personal ID (PID) _____

Telephone _____ E-mail Address _____

Name as It Should Appear on Certificate _____

ADDRESS FOR CERTIFICATE TO BE MAILED

Street or PO Box _____

City _____ State _____ Zip Code _____

PROGRAM INFORMATION

Name of Certificate Program _____

Courses taken, semester/year, and grades received (example: EIN 6546, Fall 2003, A):

_____ _____

_____ _____

_____ _____

Intended semester of completion: **Term** ☐ Fall ☐ Spring ☐ Summer **Year**_____

SIGNATURES

Program Director Signature _____ Date _____

College Coordinator Signature _____ Date _____

UCF College of Graduate Studies Approval _____ HEGIS Code _____ Date _____