

GRADUATE CERTIFICATE PROGRAM PLAN

After admission every applicant for the certificate program is required to complete and submit **one** copy of this form to the Graduate School for approval <u>before the second semester of enrollment in the program</u>.

CIP Code			Date			
Full legal name			Student's ID#			
Certificate sought						
Previous Degree(s)			Institution(s)		Year(s) Awarded	
Coursework (prefix	and number as it appear	• •				
Coursework		artments that may count)**	Transfer Co	urse #/Institution*	TTU Equivalent #*	
	quivalent to MGT 5371 at T	TTU transcript, courses must b TU. Please indicate when cour				
** Must have permissio						
Signature of Gradua	te Advisor for the Gradu	uate Certificate Program				
Graduate Dean			Date			
Approved		Conditional Approval		Not App	roved \square	
Remarks or Conditions of	of Approval					

Approval of this form by the Dean of the Graduate School merely indicates that the proposed program is acceptable; it carries no assurance of the applicant's attainment of a degree. Changes to this program may be made only with the approval of the department concerned and the Graduate School, using the form available in the Graduate School.