



SACRAMENTO STATE

Office of Graduate Studies

Academic Certificate Course Verification

Deadline: October 1 (for Fall Completion) / February 1 (for Spring/Summer Completion)

Student Name:

Form fields for Student Name (Last, First, MI, Student ID #), Address, City, ST, Zip, Telephone, and Email.

Previous Degrees:

College in which certificate will be granted:

Name of Certificate:

Student Signature

Date:

DEPARTMENT USE ONLY

Department Approval of Admission to Program

Approval questions: Is applicant matriculated at Sacramento State? Will applicant enroll through Open University? Does applicant meet pre-requisites for Certificate?

Planned Program

A Total Units Required for Certificate: B Expected Completion Date:

Table with 3 columns: C Required Courses, Completed, Grade. Includes 5 rows for course entry.

Table with 3 columns: D Elective Courses, Completed, Grade. Includes 3 rows for elective entry.

This form must be signed by the department chair or the program coordinator to confirm the student's qualifications have been reviewed and approved.

Signature of Dept. Chair / Program Coordinator Print Name of Chair or Program Coordinator

Department of:

For use by Office of Graduate Studies ONLY

I hereby certify that all requirements have been completed and that a Certificate of Academic Achievement shall be awarded to:

Units Completed: Approved Date:

Graduate Studies Dean's Signature: Date: