Revised August 2007

The College of Saint Rose

Application for the Undergraduate Certificate Programs

***Name*_____ *Student ID#*_____**

Name __
(As you would like it to appear on your certificate)

If the name you request on your certificate is different than your student record name, you must submit legal documentation of name change before your certificate will be released.

***Address*_____**

_____

***Phone ( )*_____**

Please note: Questions or concerns regarding this application will be sent to your Saint Rose e-mail account.

Certificate:
- ***( ) Microcomputer Systems***
- ***( ) Computer Programming***
- ***( ) Data Processing***
- ***( ) Web Programming***
- ***( ) Piano Pedagogy***
- ***( ) International Spanish***

***Indicate Advisor's Name* _____**

Anticipated Date of Degree Completion:

August 20_____

December 20_____

May 20_____

***Student Signature*_____ *Date*_____**

This form should be submitted as early as possible, preferably before the start of the last semester of the program from which you are applying to graduate.

Students wishing to have their Certificate mailed please provide the exact address below:

_____

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