Application for Graduate Certificate

Office of Academic Affairs
Graduate College
Illinois Institute of Technology
10 W. 35th St., Suite 7D7-1
Chicago, IL 60616
gradcoll@iit.edu

G528

Please print legibly: ❒ Mr. ❒ Mrs. ❒ Ms.

Family Name First Middle Student ID/CWID

Note: Only your full legal name at the time of conferral can be printed on the certificate. To change your full legal name, see http://www.iit.edu/registrar/student_records/update_personal_info.shtml

Reply Address (all correspondence regarding this application will be mailed to the following address):

Number and street Telephone number (area code first)

City State Zip Code

Country (if other than United States) Current U.S. Employer Business Phone (area code first)

Department Major Faculty Advisor

Applying for: ❒December ❒May ❒July Year_____

Courses completed at IIT:

Department	Course Number	Credit Hours	Semester/Year	Grade

An application fee will automatically be charged to the student account.

Note: If you do not complete certificate requirements by the end of the designate semester, you must reapply. However, you do not have to pay the application fee again.

I have read the content of this application and state that the information supplied herein is correct. I understand that if I do not meet the requirements at this time, my application for the graduate certificate will be withdrawn.

Student's Signature Date

Academic Unit Head's Signature Date

Graduate Dean's Signature Date

FOR OFFICE USE
Date received: _____
Fee: P W R
Initial: _____

Updated 6/13/2013