

HOWARD UNIVERSITY
THE GRADUATE SCHOOL

CERTIFICATION OF COMPLETION OF REQUIREMENTS FOR:

Check One:

<input type="checkbox"/>	Graduate Certificate in College & University Faculty Preparation
<input type="checkbox"/>	Graduate Certificate in Computer Security
<input type="checkbox"/>	Graduate Certificate in International Studies
<input type="checkbox"/>	Graduate Certificate in Women's Studies

Name of Candidate: _____	ID no. _____
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Is the above named candidate currently enrolled in a Howard University graduate degree program? Yes _____ No _____

Required courses for completion of this graduate certificate program:

Required Courses		Required for Degree Program (yes/no)	Non-degree Course (yes/no)
CRN & Course no.	Course Title		

Total number of hours required for this graduate certificate → _____.

Signature _____ **Program Director** _____ **Date**

Please attach:
(1) a copy of the **Letter of Admissions**, and (2) a copy of the **Approved Program of Study** for this certificate program.