Michigan Technological University
Graduate School

Course Schedule - Graduate Certificate

Complete form in Adobe Acrobat or Reader; PDF viewers in browsers do not work properly.

Graduate students: Submit this form to your Graduate Program one semester prior to final semester. Only required if online Academic Audit is not able to be used.

Graduate programs: Verify the form meets your requirements and upload the form to the **Graduate School**.

Student Information

Name _____ M Number (ex: M12345678) _____

Grad Certificate _____ Expected Graduation Term _____

List of courses for this certificate - do not include courses that cannot be applied to your certificate

Course Title (Mark: *-courses not yet completed; AC-accelerated MS; SR - Senior Rule)	Course Number (ex: BE 5300)	Number of Credits

Approvals. indicate your approval by typing your name below (if possible). Uploading the form to the Graduate School by the graduate program indicates your approval even if the form fields are not available.

Graduate Program Director Approval:

Your approval indicates that the courses meet certificate requirements.

Name _____ _____

Grad Prog Director, Dept. Chair, School Head, or College Dean Date

Graduate School Only

Total credits _____

AS _____
ACC _____
RCR _____
SFAREGS _____
SHADEGR _____
SHADIPL _____
SZAGDGR _____