



COMPLETION OF A CERTIFICATE

This application for the competition of a certificate in the School of Business should be submitted to the relevant Department Chair only when the required credits have been entirely completed or the last remaining course is in progress during the semester of graduation.

Name: _____ Email: _____

HU ID: @ _____ Expected Graduation Date: _____

Department: _____

Major: _____ Certificate: _____

List of Completed Required Elective Courses

Subject and Number	Course Title	Semester and Year Completed
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I certify that I have passed the courses above and completed all requirements for the listed Certificate.

Student Signature: _____ Date: _____

Dept Chair Signature of Approval: _____ Date: _____