



The Graduate School

Declaration or Removal of Certificate

Students are subject to the catalog requirements when the certificate is declared.

Name: _____ NSHE ID: _____ Email: _____

Student's Signature

Date

Select one: Add Remove

Certificate Requested: _____

Catalog Year: _____

If you are requesting a certificate for which you do not qualify, your request will not be processed.

Program Director's Signature

Date

For office use only

- Approved
- Denied

Comments:

Not Accepted for Submission

Evaluator Signature

Date