HOWARD UNIVERSITY
THE GRADUATE SCHOOL

CERTIFICATION OF COMPLETION OF REQUIREMENTS FOR:

Check One:

☐	**Graduate Certificate in College & University Faculty Preparation**
☐	**Graduate Certificate in Computer Security**
☐	**Graduate Certificate in International Studies**
☐	**Graduate Certificate in Women's Studies**

Name of Candidate:	**ID no.**

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.