

POST-BACCALAUREATE (GRADUATE) CERTIFICATE CLEARANCE

 Student Name (as it should appear on the paper certificate) _____
 Date

 Dawg Tag _____
 Post-Baccalaureate Certificate Earned

Number of hours completed towards graduate certificate program: _____

Student's GPA: _____ (3.0 or greater GPA in all graduate coursework is required.)

Date of Completion: _____

List courses and other requirements completed to earn the Certificate OR attach advisement checklist showing those courses and requirements.

Semester	Year	Course			#Credit Hours	Grade
		Subject	Number	Title		

Does the student currently have a job in the field? _____

If yes, visit <https://www.onetonline.org/find/all> for the list of occupations, and state the occupation below:

Comments: Certificate Program Advisor confirmation of program completion

Printed Name: _____

Signature: _____

NOTE: Please return this form to the Graduate School Graduation Office: via email at grad.graduation@siu.edu or campus mail code 4716.