

DE ANZA COLLEGE APPLICATION FOR CERTIFICATE

CWID: _____ Award Quarter: Fall Winter Spring Summer 20 _____

Phone: _____ Email: _____

PRINT NAME EXACTLY AS IT SHOULD APPEAR ON CERTIFICATE

Name: _____
First Middle Last

Street: _____

City: _____ State: _____ Zip: _____

Certificate of Achievement _____

Certificate of Achievement-Advanced _____

English proficiency met. How? _____ Math proficiency met. How? _____

Requirements to be completed:

Requirements Pending	Quarter	Final Grade

Instructions & Information

- Attach a Degree Works audit showing a minimum of 95% completion by the end of the current quarter for the certificate for which you are applying.
- Submit application with audit to the Admissions and Records drop-box located outside the south entrance of the Registration & Student Services Building. Please make sure to retain a copy for your records.
- Attach photocopies of the front & back of current CPR and 1st Aid certificates if required for Child Development, Health Technologies or Massage Therapy programs.
- Approved petitions for course substitutions must be on file in A&R prior to submitting your application.

Certificates will be mailed to the address provided approximately 3 months after the end of the quarter.

Final Action – Evaluation Office Only

Units Completed		GPA
De Anza		
Foothill		
Transfer		
TOTAL		

Award Date: _____

Verified By: _____

Cert. mailed: _____

List other colleges attended only if courses are required for the certificate.

College	ON FILE		Need Official Transcript
	Yes	No	
<input type="checkbox"/> Pre 83 De Anza			
<input type="checkbox"/> Pre 83 Foothill			

Applications must be submitted by the first day of the final month of the quarter in which you apply. Please visit www.deanza.edu for exact dates.

Student Agreement

I agree to notify the Evaluation Office at (408) 864-5300 or diploma@fhda.edu if there are any changes to this application. I understand I must complete courses in progress to meet the requirements for the certificate. It will be my responsibility to **file another application**, if I do not fulfill the requirements pending. I understand if I am eligible for any other Certificates, they will be awarded automatically along with the certificate indicated. If I would not like any further Certificates I am eligible for awarded, I will contact the number above.

Student Signature _____ Date _____