

P.O. Box 26170 • Greensboro, NC 27402–6170 • Phone: 336-334-5702• School Code: 002976

finaid@uncg.edu • <u>Spartan Central</u> • <u>Document Uploader</u> • <u>Financial Aid and Scholarships</u>

2023—2024 GRADUATE CERTIFICATE FORM		
Name	Last First	Student ID MI
E-mail		_
To be e	<del>-</del>	be registered for classes required for the specific certificate
		igibility and provide documentation from your faculty advisor to ed to continue processing your loan application.
Stude	ent's Education Certifying Statement	
	program leading to an approved certificate.	peing enrolled at least half time each semester in a I further understand that any optional courses that I ed for the Certificate Program,
	Student's Signature	Date
Advis	or's Statement	
		confirm the educational objectives of this student.  Certificate/Licensure Graduation Plan for plete certificate:
	Advisor's Signature	Date
	Advisor's Name (Please Print)	Department