

## New Graduate Certificate Transmittal Form

Department Name and Number	CIP Code			
Certificate Name				
Certification Name for Transcript (Maximum 35 characters)				
Effective Year and Term	Amount of Credit			
Certificate Description (50 words or less)				
<b>Requirements:</b> For each course indicate prefix, number, title, # credits, and established grading scheme (letter graded, and/or S/U). The title should be identical to the official title of the course as listed in the Graduate Catalog.				
Prerequisites				

"A Graduate Council approved co between the concentration and p	r offering the certificate. 2.) Please include this statement and the appropriate answer (Yes or No): incentration already exists in this area of study." 3.) If Yes, include a statement of the differences roposed certificate. 4.) If the program has students currently pursuing a non-Graduate Council ide the transition plan for these students.
Student Learning Outcomes: I	List each outcome and assessment method.
Department Contact	Name

Department Contact	Name		
	Phone	Email	
College Contact	Name		
	Phone	Email	