



UCONN

THE GRADUATE SCHOOL

WHETTEN GRADUATE CENTER | 438 WHITNEY ROAD EXTENSION, UNIT-1152, STORRS CT 06269-1152
TELEPHONE: (860) 486-3617 | FACSIMILE: (860) 486-6739 | GRAD.UCONN.EDU

PLAN OF STUDY FOR THE CERTIFICATE PROGRAM

FIRST NAME _____

LAST NAME _____

STUDENT ID # (SEVEN DIGITS) _____ NETID _____ PHONE _____

EMAIL _____

FIELD OF STUDY _____

This plan of study should be submitted to The Graduate School, Unit 1152, in the Whetten Graduate Center no later than the beginning of the student's final semester before certificate completion. The successful completion of all work indicated on the plan of study is a fundamental prerequisite for the conferring of the certificate. This form must be signed below by the major advisor before submission to The Graduate School. Any changes in listed coursework should be submitted to The Graduate School on the "Request for Changes in Plan of Study" form.

ADVISOR'S NAME (PRINTED)	ORIGINAL SIGNATURE REQUIRED
MAJOR ADVISOR _____	_____

* Formal application for graduation by the student to be placed on the list of certificate candidates must be submitted through the Student Administration System before the conferral date. See the Graduate School Academic Calendar for conferral dates and deadlines.

LEAVE BLANK
DATE BY WHICH ALL REQUIREMENTS FOR THE CERTIFICATE MUST BE COMPLETED: _____

COURSE WORK

The plan of study should be drawn up in consultation with your major advisor. List in chronological order all courses that fulfill the requirements for the certificate.

List Courses in Chronological order

COLLEGE	COURSE NUMBER	COURSE TITLE	COURSE CREDITS	LEAVE BLANK	YEAR	SEMESTER
EXAMPLE - U. OF CONNECTICUT	GRAD 5950	LEARNING WITH TECHNOLOGY	3		2010	SPRING

*The Graduate School requires certificate students to maintain at least a B (3.00) cumulative grade point average.

If additional space is required to list coursework please attach another page

Total Credits _____