

- 1 Download and open this form with Adobe viewer software to complete and save.
- 2 For Award Quarter: Fall Winter Spring Summer Year 20_____

3

Student ID# First Last

4 **Print exactly how your name should appear on certificate**

First Middle Last

5 **Certificate information (choose one)**

Cert. of Achievement Cert. of Achievement-Advanced

CHOOSE your major from the drop-down list. If your major does not appear, please see a counselor.

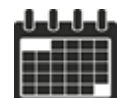
If meeting major requirements from an old catalog year, enter the year here: _____
Please visit the Counseling and Advising Center if you have any questions. ex. 2014-15

6 **Requirements in progress** **Term** **Any additional documents needed for your application?**

- Approved course substitution petitions (submit before applying)
- *Child Development, Health Tech., and Massage Therapy* majors: attach a copy of front and back of current First Aid & CPR (write your ID# on copy)
- Official transcript *not yet* evaluated: school _____

Note: this could delay your application

- 7 **Applying and timeline**
- a) Confirm your certificate completion status in DegreeWorks; check with a counselor if you need assistance.
- b) Apply during the quarter in which you will complete all of your certificate requirements.
- c) Application due dates: Fall – December 1st , Winter – March 1st, Spring – June 1st, Summer – August 1st
- d) Submit completed application to evaluationsda@deanza.edu, the Admissions and Records office, the Admissions and Records drop box, or your counselor.



e) *Timeline*: the final certificate review, award and issue process begins *after* the quarter ends. The process takes approximately three (3) months to complete; after that time eligible students will be emailed about certificates.

Evaluations Office Only		
	Units	GPA
De Anza		
Transfer		
Foothill		
Total		

Award date: _____

Verified by: _____

Date verified: _____

8 **Student Agreement**

I agree to notify the Evaluations Office at evaluationsda@deanza.edu of any changes to this application. I understand I must complete any required in-progress courses. It is my responsibility to **submit another application** if I do not fulfill the requirements pending. I understand that if it is found that I am eligible for any other degrees or certificates, they could also be awarded along with the certificate indicated. If I do not want additional awards, I will contact the Evaluations Office.

X I agree. _____ Date _____
sign or type your name