

SCHOOL OF CONTINUING EDUCATION

REQUEST FOR CERTIFICATE

I have successfully completed all courses required to receive my Certificate in the _____program

NAME: _____
(PLEASE PRINT YOUR NAME AS IT SHOULD APPEAR ON THE CERTIFICATE)

ADDRESS: _____

CITY/TOWN: _____ **POSTAL CODE:** _____

TELEPHONE: (Home) _____ (Alternate) _____

EMAIL ADDRESS: _____

STUDENT NUMBER: _____

- YES - I plan** to attend the Convocation Ceremony. I agree that photographs taken during Convocation may be used in official College printed and electronic publications.
- NO - I do not plan** to attend the Convocation Ceremony.

Please indicate how you would like to receive your certificate:

- Mail my certificate now.
- I will pick up my certificate in:
 - Room C102 - The Square, Student Services
 - Room F114 – C.E. Student Activities/MCACES Office
- Hold my certificate until my Convocation Ceremony.

NOTE: When all grades and/or exemptions are on your academic record, please mail forms to Continuing Education, Room J027, Mohawk College, P.O. Box 2034, Hamilton ON L8N 3T2; or submit in person to Room J027, Fennell Campus.

The deadline to submit is August 15th for the October convocation.

If forms are submitted after August 15th, certificates will be processed and graduates will be eligible to attend the annual Continuing Education convocation ceremony in the following year.

 (Signature of Student)

 (Date)

TO BE COMPLETED BY CONTINUING EDUCATION DEPARTMENT	
PROGRAM NUMBER: _____	
VERIFICATION OF PROGRAM NAME: _____	
<input type="checkbox"/> CLEAR TO GRADUATE <input type="checkbox"/> HONOURS GRADUATE <small>(Graduates who have achieved a Weighted Grade Point Average of 85% with no failures in their program.)</small>	AUTHORIZED SIGNATURE: _____ <small>(Signature)</small> _____ <small>(Date)</small>
DATE TO BE PRINTED ON CERTIFICATE: _____	<p><i>Academic approval must be received by the Registration/Convocation Specialists by September 15th for October Convocation</i></p>