



1801 East Cotati Avenue  
Rohnert Park, CA 94928-3609

SCHOOL OF EXTENDED EDUCATION

707.664.2394  
www.sonoma.edu/exed/

### Application for Award of Certificate

\_\_\_\_\_  
Print name as it should appear on certificate

\_\_\_\_\_  
Name of Certificate Program

\_\_\_\_\_  
Semester Completed

\_\_\_\_\_  
Daytime Telephone

\_\_\_\_\_  
Evening Telephone

\_\_\_\_\_  
Email Address

#### Address for Mailing Certificate:

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

To the best of my knowledge, I have completed all requirements for award of certification by the School of Extended Education. I understand that I will receive my certificate by mail pending approval by the Extended Education Registrar and the coordinator of the certificate program in which I have been enrolled.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Dated

#### OFFICE USE ONLY

Units/Hours Completed: \_\_\_\_\_

Transcript attached:            Yes                             No

Request for Certification: Approved                             Disapprove

For the following reasons: \_\_\_\_\_

\_\_\_\_\_  
Coordinator's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Registrar's Signature

\_\_\_\_\_  
Date