

## **Student and Certificate Information:**

Name of Student	
Campus ID #	
Certificate Title	
Term of Completion	

## Approval / Signature of Primary Department Contact Person:

Certificate should be approved only when the requirements have been completed by the student. Submit this form to Blugold Central – Registrar's Unit (VLL 1108), Attn: Degree Review or email a signed pdf copy to <u>degreereview@uwec.edu</u>.

Signature \_\_\_\_\_

Date of Signature \_\_\_\_\_

Registrar's Office Use Only	Program Code:
Completion Term:	Date: