

University of Colorado, Colorado Springs  
College of Letters, Arts and Sciences: Extended Studies Program

*Request for Award of Certificate:*  
**Graduate Certificate in Diversity, Social Justice and Inclusion**

**Part I: STUDENT INFORMATION.** Please complete fully (leave Student ID blank if you don't know it).

NAME: _____	UCCS Student ID: _____
Address: _____ _____ City State Zip	Phone Number: _____
Email Address: _____	

**Part II: CERTIFICATE TRACK.** Please indicate the semester you took each course under the “Semester Completed” column, e.g. Spring 2020, etc. Please leave the “Grade/Credit Hrs” column blank.

List below the courses you have completed to receive your certificate. You must have completed twelve (12) credit hours. Also, you must have taken at least one course offered directly by UCCS, i.e. any Independent-Progress Online course, Inclusive Teaching/Knapsack Institute, or Intersections of Privilege.

Maximum two (2) transfer credits allowed. Please attach relevant transcripts if you intend to use transfer credit.

<u>Course Number</u>	<u>Course Name</u>	<u>Semester Completed</u>	<u>Grade/ Credit Hrs</u>
<u>Course #1:</u> _____	_____	_____	_____
<u>Course #2:</u> _____	_____	_____	_____
<u>Course #3:</u> _____	_____	_____	_____
<u>Course #4:</u> _____	_____	_____	_____
<u>Course #5:</u> _____	_____	_____	_____

Date of completion of requirements (to be completed by UCCS): \_\_\_\_\_

**REQUEST FOR AWARD OF CERTIFICATE:**

I have fulfilled all the required certificate courses/credit hours as indicated above. I hereby request that my file be reviewed for completion and that I be awarded my certificate.

\_\_\_\_\_  
Student Signature Date

\_\_\_\_\_  
Program Director, LAS Ext Studies Signature Date

\_\_\_\_\_  
Director, Matrix Center Signature Date

\_\_\_\_\_  
Dean, LAS Signature Date