

# GRADUATE AND POST-BACCALAUREATE CERTIFICATE ADMISSION APPLICATION

**University of Minnesota Duluth  
Continuing Education (CE)**

Return to:  
CE Counselor  
UMD Continuing Education  
104 Darland Administration Bldg.  
1049 University Drive  
 No   
Duluth, MN 55812-3011

## For Office Use Only

Date Arr \_\_\_\_\_ Date Pd \_\_\_\_\_ Term Appl. \_\_\_\_\_  
Check # \_\_\_\_\_ Issued by \_\_\_\_\_  
(last name, first initial)  
Receipt sent on \_\_\_\_\_ by \_\_\_\_\_  
Admit: Yes  No  Date \_\_\_\_\_ by \_\_\_\_\_ Term \_\_\_\_\_  
Overall GPA \_\_\_\_\_ Adm Ltr sent \_\_\_\_\_ by \_\_\_\_\_  
Certificate credits \_\_\_\_\_ Total credits \_\_\_\_\_  
UMD Major \_\_\_\_\_ Unit \_\_\_\_\_ Degree: Yes

**A SEPARATE FORM IS REQUIRED FOR EACH CERTIFICATE PROGRAM YOU ARE APPLYING FOR.  
YOUR APPLICATION WILL BE PROCESSED WHEN ALL MATERIALS ARE SUBMITTED.**

Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
(Last) (First) (Middle/Maiden)

Current Address \_\_\_\_\_ Work Phone \_\_\_\_\_  
(Street) (City/State) (Zip)

Permanent Address \_\_\_\_\_ Cell Phone \_\_\_\_\_  
(Street) (City/State) (Zip)

Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_ UMD ID # \_\_\_\_\_

### PLEASE ANSWER THE FOLLOWING QUESTIONS:

Years of Full-Time Work Experience \_\_\_\_\_ Years of Work Experience Related to Certificate Field of Study \_\_\_\_\_

Name(s) of Universities/Colleges Attended Major/Area of Study Dates Attended Degree Earned

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

### CHECKLIST OF ITEMS TO ACCOMPANY THIS FORM:

- An official copy of each college transcript. University of Minnesota unofficial transcripts are acceptable. Transcript from graduating institution must indicate degree earned.
- A non-refundable \$25 check or money order payable to the University of Minnesota Duluth.

**TRANSCRIPTS:**  Attached  Ordered, arriving separately  On file with CE Counselor or another UMD office

### CHECK ONLY ONE CERTIFICATE PROGRAM YOU ARE APPLYING TO:

- Autism Spectrum Disorders Graduate Certificate
- Educational Computing and Technology Graduate Certificate
- Environmental Education Post-Baccalaureate Certificate

**HAVE YOU COMPLETED ANY COURSE WORK REQUIRED FOR THE CERTIFICATE PROGRAM YOU ARE REQUESTING ADMISSION TO?**       YES    NO

**If yes, please list:**

<b>Course #</b>	<b>Title</b>	<b># of Credits</b>	<b>Term Taken</b>	<b>Grade Received</b>
Example: Educ 5412	The Computer in Education	4	Fall 2007	A

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

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I certify that the information I have provided on this application form is complete, accurate and true to the best of my knowledge. I understand that it is my responsibility to submit transcripts from each academic institution I have attended. I understand that misrepresentation of application information is sufficient grounds for canceling admission to the certificate program.

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

**Equal Opportunity:** The University of Minnesota is committed to the policy that all persons shall have equal access to its programs, facilities, and employment without regard to race, color, creed, religion, national origin, sex, age, marital status, disability, public assistance status, veteran status, or sexual orientation.

# DEMOGRAPHICS FORM

Name \_\_\_\_\_  
(last) (first) (middle/maiden)

Certificate: \_\_\_\_\_ Application term/year: \_\_\_\_\_

## Request for Confidential Information

The information requested below is voluntary and will be used for summary reports required for federal and state laws and regulations and to support institutional affirmative action efforts. (It will not be used as a basis for admission or in a discriminatory manner. You will not be subject to adverse treatment if you do not provide any of the requested information.)

Check One:  Male  Female

- African American (non-Hispanic origin):** a person having origins in any of the black racial groups of Africa (excluding persons of Spanish, Latin American, or other Hispanic origin)
- American Indian or Alaska native:** a person having origins in any of the original peoples of North America or who maintains cultural identification through tribal affiliation or community recognition
- Asian:** a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, China, Japan, Korea, Cambodia, Vietnam, India, the Philippine Islands, Pakistan, Malaysia, and Thailand
- Chicano:** a person of Mexican-American origin who prefers to be known as Chicano rather than Hispanic
- Hispanic:** a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish or Portuguese culture or origin, regardless of race
- White, non-Hispanic:** a person having origins in any of the original peoples of Europe, North Africa, or the Middle East
- Native Hawaiian or Other Pacific Islander:** a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands

Are you presently listed as an International Student (non-resident alien)?  Yes  No

## Additional Information (Optional)

UMD Continuing Education (CE) Student Support Services wants to know more about the educational goals of certificate students. Your answer will help us plan for future course and certificate offerings. Federal and state laws protect your right to privacy and from discrimination. Submission of this information is voluntary.

Check the **MAIN** reason for pursuing admission into this certificate program (indicate only one response).

- A. Benchmark of progress toward completion of an undergraduate/graduate degree program.
- B. Preparation for admission to an undergraduate/graduate degree program. Proposed major \_\_\_\_\_
- C. To assist in job/career change or entrance into job market.
- D. Professional advancement in current position.
- E. To meet admission requirements of financial aid programs.
- F. Personal enrichment.

Please return this form with your certificate application and a check for \$25 (payable to UMD) to:  
CE Counselor, Continuing Education Student Support Services, 104 Darland Administration Bldg.,  
1049 University Drive, Duluth, MN 55812-3011. Thank you!

