

**POST-BACCALAUREATE (GRADUATE) CERTIFICATE CLEARANCE**

\_\_\_\_\_  
 Student Name (as it should appear on the paper certificate)

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Dawg Tag

\_\_\_\_\_  
 Post-Baccalaureate Certificate Earned

Number of hours completed towards graduate certificate program: \_\_\_\_\_

Student's GPA: \_\_\_\_\_ (3.0 or greater GPA in all graduate coursework is required.)

Date of Completion: \_\_\_\_\_

List courses and other requirements completed to earn the Certificate OR attach advisement checklist showing those courses and requirements.

Semester	Year	Course			#Credit Hours	Grade
		Subject	Number	Title		

Comments:

Certificate Program Advisor confirmation of program completion

Printed Name: \_\_\_\_\_

Signature:

NOTE: Please return this form to the Graduate School Graduation Office: via email at [grad.graduation@siu.edu](mailto:grad.graduation@siu.edu) or campus mail code 4716.