Request for Department Discipline Skills Certificate

PLEASE PR	KIN I						
Name:				Student I.D. No			
	Last	First	MI				
Address:							
			City	State	Zip Code		
Contact Nu	ımber <u>:</u>		Email Addre	ess			
						_	
Certificate	Requested			(see rev	erse side for list of	certificate	
Department/Discipline				TOP/Major Code			
must comp	lete this form and i	include the necessary item	eles College Certificate Progra ns as stated in the Certificate A general requirements before s	Application Proced	dure on the fo thik fo		
SKILLS CE	ERTIFICATE REQU	JEST SHOULD BE FILED	UNTIL ALL GRADES ARE	POSTED ON TRA	ANSCRIPTS.		
		<u>GENER</u>	AL REQUIREMENTS				
The followi	ng requirements m	ust be fulfilled before certi	ficate(s) can be granted by Ea	st Los Angeles C	ollege.		
acc stu har 3. Co	crediting agncy. The standard transcripts. The standard transcripts and carrying it, burse required for the courses fulfilling the standard transcripts.	nis requirement will be det ranscripts from other collene Certificate must be come requirements for one ce	I by the Western Association of ermined by Department Chair eges need to be mailed directly appleted at East Los Angeles Contributed to other cedure on the back of the ermined by the cedure on the back of the ermined to other the cedure on the back of the ermined by the ermined to other the ermined to other the ermined to the ermined	for the discipline, y to the Admission ollege, unless oth er certificates.	and will based on ns ORTESEAR VHG erwise approved.		
List all the	required courses for	or the Certificate Requeste	ed. Ind <u>ikhate</u> and <u>atwhat colleg</u> e	these courses we	re completed.		
Course		Semester Completed	College Where Completed	Grade Received	GPA (For Dept. Chair Use)		
				umulative GPA:			