

## Certificate Declaration Form

Students currently enrolled in a Master's program must complete and submit this form to the Registrar's office if they plan to also pursue a related certificate program. Students may not be enrolled in more than two programs at a time. Email the completed form to [hoodgrad@hood.edu](mailto:hoodgrad@hood.edu).

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

Student ID#: \_\_\_\_\_ Email: \_\_\_\_\_

Indicate Current Master's or Doctoral Program: \_\_\_\_\_

Please choose the appropriate certificate you wish to pursue:

- |                              |  |
|------------------------------|--|
| _____ Accounting             | _____ Geographic Information Systems (GIS) |
| _____ Bioinformatics         | _____ Organizational Management            |
| _____ Ceramic Arts           | _____ Project Management                   |
| _____ Cybersecurity          | _____ Secondary Mathematics Education      |
| _____ Educational Leadership | _____ STEM Education (Elementary)          |
| _____ Financial Management   | _____ Thanatology                          |

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

\_\_\_\_\_  
*Certificate Program Director Signature* *Date*

**For office use only**

\_\_\_\_\_  
*Registrar Signature/Date Entered in Record*