

## GRADUATE CERTIFICATE CLEARANCE FORM

OFFICE OF THE REGISTRAR  
220 PAWTUCKET STREET, UNIVERSITY CROSSING, SUITE M10  
LOWELL, MA 01854

phone: 978-934-2550  
fax: 978-934-4076  
email: [registrar@uml.edu](mailto:registrar@uml.edu)

Please obtain all signatures prior to submitting this form to the Registrar's Office for preparation of your certificate.

Last Name  First Name  MI

UML/SiS ID  Telephone  Email

Program

### Certificates will be mailed to your permanent address in SiS.

I understand that it is my responsibility to satisfy all financial obligations to the University of Massachusetts Lowell including, but not limited to tuition, fees, library, parking, fines, etc.

Date

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

Four courses must be completed within a five year period with a minimum 3.0 grade point average and with not more than one course with a grade below B.

### COURSES COMPLETED

Course Number	Course Title	Credits	Grade
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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* <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
* <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

\*For certificates that require more than 12 credits.

I certify that the student has met all requirements of the certificate program pending successful completion of the final semester grades.

Date

\_\_\_\_\_  
Signature of Coordinator

### NOTES:

1. You must already be matriculated into the certificate program prior to the semester you are completing.
2. Fall completion (February 1, 2020): submit by December 16, 2019.
3. Spring completion (May 18, 2019): submit by March 29, 2019.
4. Summer completion (August 31, 2019): submit by August 16, 2019.
5. Please allow a few weeks after it is posted in SiS to be mailed.

### For Office Use Only:

Doc Type: Clearance Form

Processor Name  Date  Verifier 1 Name  Effective Term

Imager Name  Date  Verifier 2 Name