

Application to Graduate with a Certificate

NOTES

1. Submit the completed application to the academic unit offering the certificate program.
2. Application Deadlines: February Convocation – November 1; June Convocation – March 1; October Convocation – August 1.
3. It is University's policy to use your full legal registered names, as listed on the Student Information System, on your diploma. Any requests to change a name by means of alteration or deletion, substitution or addition, must be accompanied by a Name Change Form and appropriate supporting documentation.

| Student Information (please type or print) | | |
|--|---|-----------------------------------|
| Student Number | Student's Full Name (<i>see Note 3 above</i>) | Home Faculty |
| Telephone | E-mail | Convocation Ceremony 20 |

| Certificate Information (please type or print) | |
|--|--|
| What certificate(s) are you requesting? (A list of certificate program names is available at calendars.students.yorku.ca .) | |
| What type of certificate are you requesting? | NOTES |
| Concurrent (Certificate AND Degree) | Some certificate programs are offered concurrently with an undergraduate degree program. Both the certificate and degree requirements must be completed prior to convocation. Concurrent certificates will not be granted retroactively. |
| Stand-alone (Certificate only) | Some certificate programs are stand-alone and do not have to be completed concurrently with an undergraduate degree. |

| Student Requesting a Certificate AND a Degree | |
|---|--|
| If you are requesting a certificate AND a degree, complete the degree information below AND also apply to graduate from the degree program by completing the graduation application available at yorku.ca/convocation . | |
| Degree Type | Graduating Program of Study (choose one) |

Protection of Privacy: Personal information in connection with this application is collected under the authority of *The York University Act, 1965* to process your application to graduate. Should York University assess you as eligible to graduate, the information will be used to include you as a member of Convocation; to prepare the Convocation Roll, program and other graduation publications and announcements; for statistical and administrative purposes; and to register you as a member of York University Alumni Association (YUAA). Personal information will be disclosed to certain organizations with which York University has an arrangement for special services at Convocation (such as but not limited to robe rentals) so that they may provide those services to you at graduation ceremonies.

In addition, the information on this form and other information held by York University will be disclosed to YUAA to inform you about the benefits of York University and YUAA career, educational and social programs; to provide you with information about alumni products and services; to facilitate alumni participation in university research projects, alumni surveys and fundraising and development activities; and to administer elections for York University and YUAA governing bodies. York University and YUAA may also disclose this information under confidentiality agreements to outside organizations or agencies solely to contact you by mail or telephone on behalf of York University or YUAA regarding products and services offered by outside organizations or agencies. If you have any questions about the collection, use or disclosure of this information by York University, please contact the Manager, Registrarial Services, W120 Bennett Centre for Student Services, York University, 4700 Keele Street, Toronto ON, M3J 1P3, 416-872-9675.

If you do not wish to receive information about or to participate in these additional programs and services offered by YUAA, you can opt-out by e-mail at alumni@yorku.ca, on the web at alumniandfriends.yorku.ca or by telephone at 1-866-876-2228. See also: alumniandfriends.yorku.ca/about-us/policies

NOTE: By completing and signing this form you consent to the use and disclosure of your personal information by York University as outlined above.

| | |
|---------------------|-----------------|
| Student's Signature | Date (dd/mm/yy) |
|---------------------|-----------------|

| Registrar's Office Use Only | | <i>Authorized Faculty Representative:</i> | |
|------------------------------|-----------------------|---|-----------------|
| <i>Certificate Approved:</i> | Yes No | <i>Program Input Date:</i> | <i>Initial:</i> |
| <i>Checked:</i> | Name Faculty | (dd/mm/yy) | |