GRADUATE CERTIFICATE IN Women's and Gender Studies Completion Form

Name:		PID:
Dept. or School		Prior Degree(s):
Email address:		Degree pursuing:
Expected date of graduation:		
Coursework Three courses taken to meet re	equirement:	
Dept. and Course #	Course Title	Semester Taken
* WGST 790 is required.		
Event Participation The event participation has been met by (briefly describe):		
Student signature:		Date:
Student Degree Advisor's signature:		Date:
Student Certificate Advisors' signature:		Date:
Director of Graduate Studies signature:		Date;
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