

Sept	ember 2017
------	------------

Name (as you want it printed on your certificate):			Student Tech ID # or Star ID:			
First Name Middle		Middle Name	ame Last Name			
(Area Code) Phone Number			E-Mail			
	DENT SIGNATURE		DATI			
lf you	icate information will be mailed to your perman have been arrested, charged or convicted of any crimina es of employment in the field you intend to study or on y	<b>necessary.</b> al offense, you should investig	ate the impact that the arres	t, charge or conviction may have on your		
	cates with an asterisk (*) require you read Gainful Empl	loyment information relating	<mark>to this certificate.</mark> Check your	student e-services dashboard for Gainful		
Emplo	yment links to your certificate(s).					
2. ( 3. /	. Campus you intend to graduate from: Cambridge (5005) Coon Rapids (5004)					
		016-2017 g.	2015-2016	2014-2015		
	Business		Computer Networking			
,	*Administrative Specialist (8416)		• *Computer Help Desk Sp	-		
I	Business Communication (8470)		Computer Network Secu	rity (8108)		
,	*Business Computer Applications (8405)		*Network Support and A	dministration (8102)		
,	*Business Generalist (8410)					
,	*Retail Management (8445)		Computer Science			
,	*Small Business Accounting (8451)		*Computer Programmin	g (8107)		
I	Biomedical		Health			
3	*Biomedical Core (8003)		Athletic Coaching (8025)	2014-2015		
3	*Biomedical Technician (8001)		Athletic Coaching (8026)	2015-2016 or 2016-2017 or 2017-2018		
	2014-2015 or 2015-2016 or 2016-2017		*Fitness Specialist (8020	)		
3	*Biomedical Technology (8006) 2017-2018		*Integrative Health and	Healing (8010)		
,	*Clinical Research Professional (8002)		*Pharmacy Technician (8	3030)		

- If planning to use transcripts from other institutions or academic standard petitions to meet your certificate requirements, you are responsible for ensuring they are completed before submitting your certificate application.
- Applications must be submitted during the semester in which your certificate is completed.
- Certificate students are not included in the spring Commencement Ceremony.
- The same certificate will not be issued twice.

Submit completed Certificate Application to: Records & Registration Office 11200 Mississippi Blvd NW Coon Rapids, MN 55433-3470 FAX: 763-433-1401