

# Application for Entry to a Certificate Program

**The completed application must be submitted for approval to the academic unit offering the certificate program.**

**Note:**

1. Certificate program requirements are listed in the York Calendar. Further information is available through the academic unit administering the certificate program.
2. This application only applies to students currently registered in a York undergraduate degree program. Normally students apply for entry to the certificate prior to completion of 36 credits of their undergraduate degree program. Some certificate programs may have additional entrance requirements.
3. Students must indicate the certificate program they wish to enter.
4. Prior to graduation with a degree, students must submit a separate application to **graduate with a certificate** to the academic unit administering the certificate.

**Please Print**

Student Information	
First Name	Last Name
Student Number	Home Faculty
E-Mail Address	Telephone Number
Current Undergraduate Degree Program	Major
Year of Study	Number of Credits Completed
Certificate Program You Wish to Enter	Offered By (Faculty)
General Certificate in Refugee and Migration Studies	<b>Department of Equity Studies</b>

Student's Signature	Date
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Authorized Academic Unit <b>Department of Equity Studies</b>	Authorized Signature (Coordinator or Adviser)
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Protection of Privacy: Personal information in connection with this form is collected under the authority of *The York University Act, 1965* for educational, administrative and statistical purposes. The information will be used to process your enrolment and registration in academic programs; to record and track your academic progress; and for related record-keeping purposes. If you have any questions about the collection, use or disclosure of this information by York University, please contact the Manager, Student Client Services, W120 Bennett Centre for Student Services, York University, 4700 Keele Street, Toronto ON, M3J 1P3, 416-872-9675.

<b>Office Use Only</b>	Input Date _____ Initial _____
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