

**Petition to Pursue a Certificate within a Graduate School Program**

INSTRUCTIONS: This form is only to be used by a Classified Graduate School student at Saint Louis University desiring to pursue a certificate concurrent with (parallel to) an advanced degree. After completing the first section of the form, the student must route the petition to the major field for clearance and evaluation, then to the certificate director for assessment of adequate preparation, and finally to the Graduate School, 106 Verhaegen Hall.

Please Print: \_\_\_\_\_ Banner ID # \_\_\_\_\_  
(Last Name) (First Name) (M.I.)

Local Address: \_\_\_\_\_  
(No. and Street, Apt./Box No.) (City) (State) (Zip)

Email Address: \_\_\_\_\_ Local Phone No.: \_\_\_\_\_

I have been unconditionally admitted to seek  Master's  Ph.D. degree with a major in \_\_\_\_\_

\_\_\_\_\_ I desire to add to my current degree-program pursuit of the "parallel" certificate checked below.

- Certificate in Empirical Research Methods in Descriptive Ethics
- Certificate in Renaissance Studies
- Certificate in Women's Studies
- Certificate in Rhetorical Studies and Writing Pedagogy
- Certificate in Medieval Studies

Date: \_\_\_\_\_ Signed: \_\_\_\_\_  
(MM/DD/YY)

**Recommendation of the Major Field:**

(Note: The student and the major field must understand that, although some completed, advanced, academic work will partially fulfill requirements for both certificate and degree, and some elective credits within the degree program may be assigned to the certificate, full completion of both sets of requirements may total in credit hours an amount greater than that required to earn the degree alone.)

I recommend  approval  denial of this petition.

Signed: \_\_\_\_\_  
Major-Field Chairperson/Program Director (Date)

Comments, if any: \_\_\_\_\_

**Recommendation of the Certificate Director:**

I recommend  approval  denial of this petition

Signed: \_\_\_\_\_  
(Date)

Prerequisite deficiencies, if any: \_\_\_\_\_

**Petition is  approved  denied by The Graduate School on this date:** \_\_\_\_\_

Remarks/Conditions: \_\_\_\_\_

Signed: \_\_\_\_\_ Title: \_\_\_\_\_

Copies sent to  Student  Major Field  Certificate Director  Registrar on \_\_\_\_\_