

APPLICATION FOR ADVANCED CERTIFICATE IN HEALTH LAW & POLICY

Please submit this form to the Registrar's Office the semester prior to graduation.

Print name as it should appear on your certificate:

Cell Phone #: _____

U #: _____

Current Student: _____ Current GPA: _____

Anticipated Date of Graduation: _____

Basic Requirements: All candidates must complete total of 15 Health Law course credits, including the required courses. You must have an average grade of B or better and no grade below C. Also, all candidates seeking the certificate must graduate with an overall GPA of 2.5 or better. See list of courses attached. Check off the courses you have taken and return all forms to the Registrar's Office.

I hereby apply for a Certificate in Health Law & Policy at Pace University School of Law and agree to be bound by all the rules thereof, now existing or hereafter adopted. I certify that, to the best of my knowledge, all statements on this form are correct and complete.

Student's Signature

Date

For Registrar's Use Only:

Approved: _____

Denied: _____

(see page 2)

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