

CERTIFICATE ORDER FORM

If you are working to complete the requirements for either an undergraduate or a graduate certificate, please fill out and submit this form along with the NON-REFUNDABLE \$25 fee to:

**Golden Gate University
Cashier
536 Mission Street
San Francisco, CA 94105-2968**

You may also submit this to the administrative office at your regional location.

If you are uncertain about the exact requirements or title of the certificate you are seeking, please consult with your Academic Advisor, or the catalogue for the academic year you began the program.

Please allow four to six weeks for delivery.

Social Security/GGU ID number: _____ Date of attendance: _____
month/year to month/year

Name as you would like it to appear on your certificate (please print or type):

Name on Golden Gate University academic record if different from above:

NOTE: If you wish to have your certificate issued in a name which differs from that on our academic records, you must attach documentation verifying a legal name change (for example, a photocopy of a marriage certificate, etc.)

Mr. Ms. _____
 (check one) last (family/legal) name first (given) name middle name or initial

Address where you want certificate mailed:

_____ city state zip code country

Telephone: Day _____ Evening _____

Fax: _____ E-mail: _____

I am applying for Undergraduate Graduate

Certificate in: _____

I will complete all requirements by the end of the: Fall Spring Summer Year: _____

Method of Payment: Cash Check Money Order (made out to "Golden Gate University")
 Visa MasterCard American Express

Card Number: _____ Exp. Date: _____

Student's Signature: _____ Date: _____

For Golden Gate University use only. Date Received: _____ Initials of Receiver: _____ Date Mailed: _____	STAMP IF PAID
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