

# Graduate Certificate in Radiation Curing Chemistry

## *Application and Certificate Request Form*

Parts 1 and 2 should be completed by the applicant. Return this completed form to:

SUNY College of Environmental Science and Forestry  
Office of Instruction and Graduate Studies  
227 Bray Hall  
Syracuse, NY 13210

### **Part 1 (Application)**

Date of Application: \_\_\_\_\_

Student Name: \_\_\_\_\_

Student Identification #: \_\_\_\_\_

Local Address:

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State

\_\_\_\_\_  
ZIP code

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Home Academic Institution (check one of the following boxes):

SUNY College of Environmental Science and Forestry

Syracuse University

Degree Information

\_\_\_\_\_  
Program

\_\_\_\_\_  
Degree

\_\_\_\_\_  
Matriculation  
Date

\_\_\_\_\_  
Anticipated Graduation  
Date

\_\_\_\_\_  
Student Signature

The applicant must furnish evidence of (a) current matriculation, and (b) good academic standing in an eligible degree program at SUNY-ESF or Syracuse University. This evidence is provided by letter from the appropriate ESF or Syracuse University college official, as identified in the Certificate Advising Guide.

CRT (Office Use Only): \_\_\_\_\_

**Part 2 (Certificate Request)**

Instructions: When you have completed both required courses for the Certificate, complete the following and send to: SUNY College of Environmental Science and Forestry, Office of Instruction and Graduate Studies, 227 Bray Hall, Syracuse, NY 13210.

Date Requested: \_\_\_\_\_

Full Name, as you wish it to appear on the Certificate. Please print:

\_\_\_\_\_

Certificate Mailing Address (address to which the Certificate should be sent):

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State

\_\_\_\_\_  
ZIP code

*Office Use Only:*

Certificate Request Form received by Graduate Office (Date): \_\_\_\_\_

Program Requirements:

- B.S. (or equivalent)
- BPE.510, and .536 completed
- Cumulative grade of B or better in all courses

Program Certification:

\_\_\_\_\_  
Charles M. Spuches  
Program Chair

\_\_\_\_\_  
Date

Final approval of Certificate:

\_\_\_\_\_  
Scott S. Shannon, Dean of Graduate Studies

\_\_\_\_\_  
Date

Certificate Mailed (Date): \_\_\_\_\_