



FORT HAYS STATE UNIVERSITY

Forward thinking. World ready.

DEPARTMENT OF MANAGEMENT AND MARKETING

Intent to Complete a Certificate

Student _____
(Last Name) (First Name) (Middle Name)

Student ID# _____ Expected Graduation Date _____

Major _____ Major Advisor _____



CONTACT INFORMATION (List the address the certificate(s) can be mailed to)

(Street Address) (Apt #)

(City) (State) (Zip Code)

(Telephone Number) (Email Address)

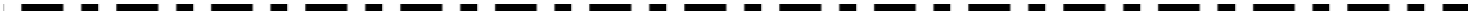


Declare Intention to Pursue Undergraduate Certificate in (check all that apply):

- Management Customer Service Human Resource Management
- Marketing Operations Management Business Law

Please indicate courses you have and will be taking in the space provided below that only pertain to the certificate(s) program. (Ex: MGT 611 VA Spring 2009)

<i>Course Prefix</i>	<i>Course Number</i>	<i>Course Section</i>	<i>Semester</i>	<i>Year</i>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____



Student Signature _____

Program Approval _____
(Department Chair Signature) (Effective Date)