



## CERTIFICATE AUDIT WORKSHEET

**To be completed by school administrative staff:**

Student Name: \_\_\_\_\_ Student ID#: \_\_\_\_\_

Certificate (please circle): CAGS / CACS / CGS / CUGS

Concentration/Area: \_\_\_\_\_

Completion of Core Courses? \_\_\_\_\_

Is GPA above 3.0 (2.0 for JD, MDiv, MA in PT or Miss, and UG)? Yes  No

Hours completed \_\_\_\_\_ (all hours must be completed before student is authorized and application is forwarded to Registrar's Office)

Based on the above evaluation, the student is **authorized** for certificate clearance.

Based on the above evaluation, the student is **denied** for certificate clearance.

\_\_\_\_\_  
(Dean)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Advisor)

\_\_\_\_\_  
(Date)

**Please submit to Registrar's Office with a print-out of certificate application and ADP.**

**To be completed by Registrar's Office:**

Holds? Yes  No  GPA: \_\_\_\_\_

All Grades Passing? \_\_\_\_\_ All Courses Taken? \_\_\_\_\_

Certificate Date \_\_\_\_\_ based on \_\_\_\_\_

Posted Certificate? Yes  No  Certificate Order Form Completed? Yes  No

Date Certificate Approval \_\_\_\_\_ Registrar Staff \_\_\_\_\_

Student is denied certificate approval \_\_\_\_\_ Registrar Staff \_\_\_\_\_