



**Office of the  
University Registrar**  
25 University Avenue, West Chester, PA 19383  
Ph: 610-436-3541 Fx: 610-436-2370  
[www.wcupa.edu/registrar](http://www.wcupa.edu/registrar)

WCU ID# \_\_\_\_\_

*Required*

**APPLICATION/REMOVAL FORM FOR  
CERTIFICATE IN COMPUTER SECURITY  
UNDERGRADUATE STUDENTS ONLY**

*Instructions:* Please complete all information on the form and obtain ALL appropriate signatures. Once complete, return to the Registrar's Office for processing.

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

Are you a degree-seeking student or non-degree? Degree / Non-Degree (please circle one)

- If degree-seeking, what is your major: \_\_\_\_\_

Anticipated Graduation Term: \_\_\_\_\_

**Undergraduate Certificate in Computer Security**

Plan: **C 225**

If **applying** for the Certificate in Computer Security please check here: \_\_\_\_\_

If **removing** the Certificate in Computer Security please check here: \_\_\_\_\_

*Note: Form must have signature of the department chair from Computer Science. When the signature is obtained, please deliver form to the Office of the Registrar.*

**CHAIRPERSON of COMPUTER SCIENCE:**

Comments: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**Student's signature/Date (required):** \_\_\_\_\_

**Office Use Only**

Processed by: \_\_\_\_\_ Date: \_\_\_\_\_