



APPLICATION OR REMOVAL FORM FOR
**Undergraduate Certificate in
Computer Security**
UNDERGRADUATE STUDIES

Name _____, _____, _____
(LAST) (FIRST) (M.I.)

Student I D Number 0 _____

Application for: **Undergraduate Certificate in Computer Security** Plan: **C 225**

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

- If degree-seeking, what is your major: _____

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

Students

Do not write below this line. Application must be signed by the following:

1. CHAIRPERSON from COMPUTER SCIENCE

Comments _____

Signature _____ Date _____

Please check the box below and sign if you want to be removed from the Undergraduate Certificate in Computer Security. *Please note you still need the signature from the Department Chair in order to drop from this program.*

Please remove me from the Undergraduate Certificate in Computer Security.

Student Signature: _____

Return this form to the Office of the Registrar.
Incomplete forms may not be processed.