

Completion Checklist
Multimedia Communications
Digital Photography Certificate of Completion (524H)
Effective: Fall, 2009

Program Advisor: Mia Boster

Student's Name:	Student ID Number:
Advisor:	Advisor's Signature:

Degree Requirements	Approved Substitutions	Name Of Course	Credits	Credits Completed	In Progress Qtr/Yr
Media 175		Principles of Digital Photography	4		
Media 201		Digital Image Editing	5		
Media 203		Advanced Digital Photography	5		
CREDITS REQUIRED FOR CERTIFICATE:			14		

The following information is needed to produce your certificate:

Quarter and Year Certificate was completed: Fall <input type="checkbox"/> Winter <input type="checkbox"/> Spring <input type="checkbox"/> Summer <input type="checkbox"/> 20__
Name to be printed on Certificate: _____ <div style="display: flex; justify-content: space-around; margin-top: 5px;"> First Middle Last </div>
Mailing Address: _____ <div style="display: flex; justify-content: space-between; margin-top: 5px;"> Street/P.O. Box City State Zip </div> <p style="text-align: center; margin-top: 5px;">(If no mailing address is provided, Certificate may be picked up at the Reception desk in the Student Services Bldg.)</p>

For Office Use Grades verified <input type="checkbox"/> Date Certificate Posted: _____ Processed By: _____ Certificate Mailed <input type="checkbox"/> or Forwarded to Program Advisor <input type="checkbox"/>
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