

**REQUEST TO ADD/DROP GRADUATE CERTIFICATE  
TO/FROM CURRENT PROGRAM**

**OAKLAND UNIVERSITY**

**GRADUATE STUDY**

520 O'Dowd Hall  
Rochester, MI 48309-4401

Phone: 248-370-2700

**Submit original completed form to Graduate Study, 520 O'Dowd Hall**

**Instructions:** This form is to be used only by students who have been admitted to a master's degree program and wish to add a graduate certificate to their degree program or to drop a graduate certificate from their degree program. If adding a graduate certificate, please note that additional application material may be required. These requirements are detailed in the Graduate Catalog and at [www.oakland.edu/grad](http://www.oakland.edu/grad).

**Please Note:** Regulations governing graduate programs require that all credit applied toward a degree must be earned within six (6) calendar years of the awarding of the degree or certificate.

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**To be completed by the Student:**

Name: \_\_\_\_\_ Grizzly Number: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

E-Mail Address: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Present Program: \_\_\_\_\_

**CHECK ONE:**  **ADD**  **DROP** **PROGRAM:** \_\_\_\_\_

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

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

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**To be completed by Department or School:**

Semester of Admission: \_\_\_\_\_ Program: \_\_\_\_\_

Approve  Conditional Approval  Deny  Delay

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

Name (print or type): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**To be completed by Graduate Study:**

Semester of Admission: \_\_\_\_\_ Program: \_\_\_\_\_

Approve  Conditional Approval  Deny  Delay

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

Director/Representative of Graduate Study: \_\_\_\_\_ Date: \_\_\_\_\_

Copies: department, student file (original)