

**STATEMENT OF INTENT TO ENROLL:
UNDERGRADUATE CERTIFICATE OF COMPETENCY****LEGAL NAME:**_____
First Middle Last**PREFERRED NAME:**_____
First_____
DATE OF BIRTH S _____
STUDENT ID# (previous/current students)**LEGAL SEX IN YOUR HOME STATE OR COUNTRY:** ___ Male ___ Female**GENDER IDENTITY:** ___ Man ___ Woman ___ Transgender ___ Self-Identify, please specify _____**PERMANENT MAILING ADDRESS:**_____
Street Apt/Unit#_____
City State ZIP/Postal Code

Have you lived and resided in the Commonwealth of Massachusetts for purposes other than attending an educational institution for the past 12 months? ___ Yes ___ No

CONTACT:_____
Phone Email*I have read the **Procedures and Policies** (see page 2) and wish to enroll in the **Undergraduate Certificate Program** in:*_____
Certificate Program Name**TRANSFER CREDITS (please check if applicable):**

___ Transcript(s) of courses for evaluation for possible transfer are enclosed.

___ Transcript(s) of courses for evaluation for possible transfer are being sent.

*No more than nine (9) credits will be transferred and must be undergraduate level courses

Salem State University seeks students of all racial and ethnic groups. Your response to the following questions will assist us in our compliance with federal reporting mandates and will NOT be used in the evaluation of your application and is optional:

Ethnic background: Do you consider yourself Hispanic or Latino? ___ Yes ___ No

What is your racial background? (Check one or more):

___ American Indian/Alaskan Native ___ Asian ___ Native Hawaiian or Other Pacific Islander

___ Black or African American ___ White

Please return/mail this form signed to:
Student Navigation Center Attn: Academic Services
Salem State University | Central Campus
352 Lafayette Street
Salem, MA 01970

CERTIFICATE OF COMPETENCY PROCEDURES AND POLICIES

1. All Certificate of Competency programs and courses carry full undergraduate academic credit.
2. Some Certificate programs may require achievement of a minimum grade point average determined by the sponsoring academic department. In no event will a Certificate be awarded to a student who completes Certificate requirements with less than a 3.0 grade point average.
3. The student must file a Statement of Intent form prior to the completion of the fourth course within the program.
4. Once the student files the Intent form, all remaining courses must be completed at Salem State University through the School of Continuing and Professional Studies.
5. No more than nine (9) credits will be transferred into the program. Outside courses to be considered for transfer, subject to approval by the department chairperson, should be submitted to the Student Navigation Center. The transcript(s) must be official and should be submitted along with the Statement of Intent
6. Certificates will be mailed to students when completion of requirements has been verified. The students must notify the Student Navigation Center of intent to complete during the final semester of enrollment.
7. Certificate of Competency requirements are departmentally determined. All requirements must be fulfilled prior to the awarding of the certificate.