Application for Completion of

Additional Work, Certificate, or Education Licensure-Only Program

Please print the following:

Learner ID #:_____

Name*:_____

**for learners completing a certificate(s), please print name exactly as you wish on certificate*

Additional work toward degree (check appropriate major):

- ☐ Accounting
- ☐ Business Administration
- ☐ Business Quality Management
- ☐ Criminal Justice
- ☐ Computer Operations Technology
- ☐ Computer Programming Technology
- ☐ Healthcare Administration
- ☐ Human Resource Development
- ☐ Operations Management
- ☐ Pastoral Studies
- ☐ Security Management
- ☐ Strategic Leadership
- ☐ Youth Ministry

Certificate (Undergraduate-level):

- ☐ Change Leadership
- ☐ Cyber Crime Investigation
- ☐ Enterprise Quality Management
- ☐ Essentials of Human Resource Management
- ☐ Homeland Security
- ☐ Lean Six Sigma
- ☐ Ministry Leadership
- ☐ Operational Leadership
- ☐ Organizational Communication

Certificate (Graduate-level):

- ☐ Emergency Planning
- ☐ Enterprise Risk management
- ☐ Executive Leadership
- ☐ Executive Quality Management
- ☐ Youth Ministry for the Lay Leader

Education Licensure-Only Program (non-majors only):

***noted subjects offered by SC also are part of a specific major/degree program; students pursuing such a degree program must instead submit an Application for Degree by the appropriate published deadline.*

- ☐ American History, World History, & Political Science Secondary Licensure
- ☐ Biology Secondary Licensure
- ☐ Business Secondary Licensure
- ☐ Chemistry Secondary Licensure
- ☐ Early Childhood Education Licensure**
- ☐ Elementary Education Licensure**
- ☐ English Secondary Education Licensure**
- ☐ Mathematics-Middle Level Licensure**
- ☐ Mathematics-Secondary Licensure
- ☐ Music Education Secondary Licensure**
- ☐ Physical Education Secondary Licensure**
- ☐ Speech and Theatre Secondary Licensure**

I have reviewed my progress with my academic success coach and to the best of my knowledge have fulfilled all requirements for the above major(s) as additional work toward a degree I have earned at Southwestern College, or the designated certificate or education licensure program.

Signature:_____ **Date:**_____

Notation of transcript: *The completion date of the additional work, certificate, or licensure program noted on the learner's transcript will be the end of the month the application is received by the Office of the Registrar, provided all program requirements have been met satisfactorily.*

Receipt of certificate: *Certificates will be mailed within 4-6 weeks of application to the home address on file in Self Service, provided all program requirements have been met satisfactorily.*

Mail, fax, or email scanned form to: Office of the Registrar, 100 College St., Winfield, KS 67156; F: 620.229.6384; registrar@sckans.edu

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