

UNDERGRADUATE CERTIFICATE APPLICATION OFFICE OF THE REGISTRAR

Please Note: This is not an application for Admission to a degree program at the university. Students desiring admission to a degree program must fill out an Admission Application with the Office of Admissions. This certificate application includes a \$30.00 non-refundable processing fee, which will be assessed upon enrollment of classes for Certificate Program Students.

Important: Have you ever received a grade from FIU	J? []Yes []No		Term: Fall
Certificate Program:	Code (office use):	Spring Summer	
Social Security Number (SSN):	Panther ID:	r ID:	
Social Security Number (SSN): Please read written notification on collection and usage of Social Security Number (SSN):	rity Numbers found at the end of this application.		
Name:			
Last	First	MI	
Permanent Address:	011		
Street	City	State	Zip Code
Email:	Telephone Number:		
N. C. COLL.	DI CD' d	D O D	
Nation of Citizenship:	Place of Birth:	D.O.B.:	
Sex: [] Male [] Female			
Race: [] (A)-Asian or Pacific Islander [] (I)-American Indian or Alaskan Native	[] (B)-Black (Not of Hispanic origin) [] (W)-White		spanic Iot Specified
*** Thin	section is to be filled out by non-US citizens. ***		
	•		
Country of BirthCountry of Citize Are you a permanent resident? [] Yes [] No Resident	nship:	a Data.	Resident Card #:
vou answered NO to the question above, you MUST respond	to the following questions: Visa Expiration	Date:	II Do
you presently have a visa? [] Yes [] No What type of visa do you expect to hold while at Florida Inter	If yes, indicate type: [] Student	(F-1) []Other (specify)
Proof of legal status in the United States must be included with th	is application. Please submit applicable proof: (i.e., C	opy of U.S. Passport or Ce	ertificate of Naturalization;
Permanent Resident Alien Card or Copy of Visa issued). Failure to with Visas must be cleared with FIU International Student Service 5813.			
Failure to answer these questions will delay the	nrocassing of your application and we will be a	ınahla to randar an a	dmission decision
If your answer to any of these questions is yes, you are	re required to provide a written explanation	of the event, as wel	l as copies of all official
documentation explaining the final disposition of the			
Conduct and Conflict Resolution Department, so that that this hold can ONLY be resolved by the Student Co			
St	tudent Conduct and Conflict Resolution		
	Modesto A. Maidique Campus: GC 311 305-348-3939		
Have you ever been subject to disciplinary action or do you or reasons:	currently have disciplinary charges pending by an	y educational institutio	on for any of the following
[] Yes [] No Academic misconduct (such as cheating that was due to poor grades	g), you so not need to disclose any academic dismi	ssal, suspension, or pro	bation
[] Yes [] No Behavioral misconduct (such as fighting	3)		
[] Yes [] No Have you ever been convicted of, or cha	arged with, a criminal offense or are you currently	the subject of any crin	ninal proceedings?
NOTE: ALL APPLICANTS MUST SUBMIT THEIR IMMUNIZAT	ION DOCUMENTS TO MMC LIHSC 101 or FAX: 305	-348-3336 / BBC HWC	or FAX: 305-919-5312

OneStop Enrollment Services

Modesto A. Maidique Campus • 11200 SW 8th Street, PC 130 • Miami, Florida 33199 305-348-2320 • Fax 305-348-2941 • onestop.fiu.edu

Biscayne Bay Campus • 3000 NE 151st Street, AC1 100 • North Miami, Florida 33181 305-919-5750 • Fax 305-919-5403 • onestop.fiu.edu

Instructions: Print in ink.

- Complete the form, sign it, and turn it in to the academic department (organization).
- Have all transcripts from your previous institutions mailed directly to the academic department (organization).
- The academic department (organization) will notify you of their decision.
- If you are an international student, contact the Office of Admissions regarding your visa status and additional admission requirements.
- If you are applying also for a degree program, you must complete a separate admission application and turn it in to the Office of Admissions.

Name of School		sity you have attended, or Location	•	Dates of Attendance From (MMDD) to (MMDD)	
		LOCATION	(MMDD) to (MMI		
Students applying to a C	Certificate Program in the	College of Education must	t fill out the additional Inf	ormation below:	
Are you certified to teach?	Yes: () No: ()	Rank:	Field:		
If "Yes", in what State:		Type of Certification	:		
Indicate below your prof	essional work experience	9 :			
Occupation	Name and Address of Employer	Supervisor's Name	Letter name	From	То
	Please list three referen	ices that may be contacted	concerning your profes	sional abilities:	
			3,14, 1		
Acad	lemic Depar	rtment (Orga	anization) L	Ise Only	/
The student's academic cr	redentials have been review	ed and the student is hereby	<i>/</i> :		
		Approved	Denied		
for acceptance into the Certi	ficate Program for the:				
	Fall	Spring	_ Summer	term.	
	_		_		
Please indicate certificate ty	pe:	Academic	Professional		
Academic Dept. (Organiza	tion) Authorizer: Name (pri	nt):	P.I.D).:	
	Signature:		Date	:	

Note: Please return this form to the OneStop Office and notify the student of your decision.

Residency Classification

A Florida "resident for tuition purposes" is a person who has, or a dependent person whose parent or legal guardian has, established and maintained legal residence in Florida for at least twelve months proceding the first day of classes of the term for which Florida residency is sought. Residence in Florida must be as a bonafide domicile rather than for the purpose of maintaining a residence incident to enrollment at an institution of higher education. To qualify as a Florida resident for tuition purposes, you must be a U.S. Citizen, permanent resident alien, or legal alien granted indefinite stay by the Immigration and Naturalization Service. Other persons not meeting the twelve-month legal residence requirement may be classified as Florida residents for tuition purposes only if they fall within one of the limited special categories authorized by the Florida Legislature and Florida Board of Education. All other persons are ineligible for classification as a Florida "resident for tuition purposes." Living in or attending school in Florida will not, in itself, establish legal residence. Students who depend on out-of-state parents for support are presumed to be legal residents of the same state as their parents. Residency for tuition purposes requires the establishment of legal ties to the state of Florida. Students must verify that they have broken ties to other states if the student or in the case for dependent students, his or her parent, has moved from another state within the past 12 months.

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Non-Florida Residents						
	ne term for which this application is submitted and that if I should qualify for some or to the beginning of the term in order to be considered for Florida residency					
Signature (in ink)	Date					
I. Florida Residents						
The next three sections must be completed in full if you claim Florida residency	y for tuition purposes					
I am an independent person and have maintained legal residence in Florida for at least 12 months.						
(Required: Copy of most recent tax return on which you were claimed as a dependent or other	oarent or legal guardian, and my relative has maintained legal residence in Florida for at least 12 months er proof of dependency.) 2 consecutive months. I have now established legal residence and intend to make Florida my permanent					
	ition purposes. I abandoned my Florida domicile less than 12 months ago and am now re-establishing					
	ident alien or other legal alien granted indefinite stay and have maintained a domicile in Florida for					
at least the past 12 consecutive months. (Required: INS documentation and proof of resident	tive military duty pursuant to military order, or whose home record is Florida, or I am a member's					
I am a full-time instructional or administrative employee employed by a Florida public school, or I am the employee's spouse or dependent child. (Required: Copy of employment verificatio I am a qualified beneficiary under the terms of the Florida Prepaid College Program (s240.551. I am living on the Isthmus of Panama and have completed 12 consecutive months of college wo	on.) .F.S.).					
(Required: Copy of marriage certificate or proof of dependency.)						
I am a Southern Regional Education Board's Academic Common Market graduate student. (Re						
I am a full-time employee of a state agency or political subdivision of the state whose student f corrections training.	fees are paid by the state agency or political subdivision for the purpose of job-related law enforcemen	t and				
1 am a McKnight Fellowship recipient. (Required: Verification from the University Graduate Sc	chool.)					
II. Florida Residency Information						
Name of person claiming Florida residency:	Claimant's relationship to student:					
Claimant's permanent legal address:		_				
Claimant's telephone number:	City State Zip	_				
Date claimant began establishing legal Florida residence and domicile (month/yea	ar):	_				
III. Documents from at least two of the following items must be	provided.					
Claimant's Florida voter registration State:Number:		:				
Claimant's Florida driver's license State: Number:	,	±:				
Claimant's Florida vehicle registration State:*Number:	Issue date:					
Note: Other documentation as defined in s.1009.21(3)(c)may be used in cases where the documentation as defined in s.1009.21(3)(c) may be used in cases where the documentation as defined in s.1009.21(3)(c) may be used in cases where the documentation as defined in s.1009.21(3)(c) may be used in cases where the documentation as defined in s.1009.21(3)(c) may be used in cases where the documentation as defined in s.1009.21(3)(c) may be used in cases where the documentation as defined in s.1009.21(3)(c) may be used in cases where the documentation are defined in s.1009.21(3)(c) may be used in cases where the documentation are defined in s.1009.21(3)(c) may be used in cases where the documentation are defined in s.1009.21(3)(c) may be used in cases where the documentation are defined in s.1009.21(3)(c) may be used in s.1009.21(d) may be used in s.1						
Non-U.S. Citizens only						
Resident Alien Number:	Issue date:	_				
(Please submit a copy of your Alien Registration Card, front and back, with this application.)						
	ts indicated in the checked category above for classification as a Florida resident for ne to penalties for making a false statement pursuant to 837.06, Florida Statutes and					
Signature of person claiming Florida residency (as listed in item II above)	Date	_				

Application must be submitted to the department for approval.