

# APPLICATION FOR SUSTAINABLE URBANISM PROGRAM

Name: \_\_\_\_\_ Student UIN Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

*This address will be used to mail your certificate to you after graduation if you do not pick it up.*

Phone(s): \_\_\_\_\_ Email: \_\_\_\_\_

Date of application: \_\_\_\_\_

**Degree Program:**

- |   |   |
|---|---|
| <input type="checkbox"/> Ph.D. (ARCH)<br><input type="checkbox"/> Ph.D. (URSC)<br><input type="checkbox"/> Ph.D. (Other) _____<br><input type="checkbox"/> M.ARCH<br><input type="checkbox"/> MS (Arch)<br><input type="checkbox"/> MLA | <input type="checkbox"/> MUP<br><input type="checkbox"/> MLPD<br><input type="checkbox"/> MS (COMG)<br><input type="checkbox"/> MS (VIZA)<br><input type="checkbox"/> MFA<br><input type="checkbox"/> MA/MS (Other) _____ |
|---|---|

Chair of Graduate Advisory Committee: (If known) \_\_\_\_\_

Expected completion date: \_\_\_\_\_

## STUDENT DEGREE PLAN SUSTAINABLE URBANISM CERTIFICATE

List the courses you propose to meet the Sustainable Urbanism Certificate requirements.

Department Abbreviation	Course Number	Course Title	Credit Hours
<b>TOTAL CREDIT HOURS</b>			

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Sustainable Urbanism Certificate Chair

\_\_\_\_\_  
Date

ORIGINAL	COPY	COPY
<u>Certificate Chair</u>	<u>Student</u>	<u>Student Program's Office</u>
Shannon Van Zandt	Retain one copy	Staci Dunn

Student is responsible for delivering a copy of the signed application to each of the offices listed.

