

Department of Women's, Gender, and Sexuality Studies

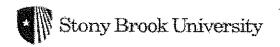
APPLICATION

Women's and Gender Studies Graduate Certificate Program

Name:	<u> </u>	
Address:		
Email:		
Undergraduate Education:		
Graduate Education:		
To what department/program have you applied?		
Degree being pursued:		
Have you been formally accepted yet?		
Have you begun work in the program yet?		•
What previous work in Women's and Gender Studies have you done? _		
Undergraduate:		
Graduate:		1,4 4,4
Signature:	Date:	

Please bring or send completed form to:

Women's and Gender Studies Graduate Certificate Program Department of Women's, Gender, and Sexuality Studies Stony Brook University Humanities Room #2048 Stony Brook, NY 11794-5356



The Graduate School
The School of Professional Development
gradadmissions@stonybrook.edu
spd@stonybrook.edu

Permission to Enroll in a Secondary Certificate Program

Bernoth Colory (Charlet Colors to Section 1) (all Colors in 100) is

Academic Information		
Last Name (Current Name on SB Records)	First Name	Student I.D. No. (not Social Security #)
Are you a U.S. citizen? Yes	No If you answered NO to both quest	ions, indicate your immigration status:
Are you a Permanent Resident? Yes	No .	
Are you participating in a certificate p	orogram? Yes No Academic	Level (circle one) G1 G2 G3 G4 G5
Signature of Student		Date
adding an additional certificate program the tir within the time limit for the original program developed a completion plan for both degre program for which it was awarded, and that	ck concurrently towards the secondary certificate me limits for the first degree remains the same and completion. By signing below, we certify that we les. We understand that tuition scholarships may the student must be enrolled fulltime to receive the student being accepted into the certificate part by International Services.	d the student must complete the second program have reviewed the student's transcript and have y only be used for coursework pursuant to the ive a tuition scholarship. We understand that a
Primary Degree Program		
Primary Program	Degree Plan (circle one) MA MBA MFA MM MS DA DN	Matriculation Date (circle one)
Advisor's Signature Student's Graduate Program Director (Ple	ase Print)	Date
Certificate Program	Semester Start (Circle One) Fall Spring Summer 20_	
Student's Graduate Program Director (Ple	rase Print)	
GPD's Signature		Date
Visa & Immigration Services Signature (if required):	Date:
For Graduate School & School of Profess	sional Development Use Only:	
Denied & Reason:		Date:
Approved & Processed:	Signature	Date:
l	Signature	

Graduate School: 2401 Computer Science Bldg.

School of Professional Development: 2321 Computer Science Bldg.

WOMEN'S AND GENDER STUDIES GRADUATE CERTIFICATE REGISTRATION FORM

The Graduate Certificate in Women's and Gender Studies consists of 15 credits:

9 credits required courses
6 credits elective courses

Student Information:			
Name:	Student ID:		
Campus Address:	Campus Telephone#:		
	Home Telephone#:		
	Email address:		
	YY , LITOD		
Home Address:	Degree expected:		
	Expected graduation date:		
A. Core Requirements (9 credits):	Semester completed Grade Credits		
WST 600 (Hist. & Methods of	of WaGS)		
WST 601 (Feminist Theory)			
WST 698 (Teaching Pract. Ir	n WaGS)		
B. Electives (6 credits must be 600-lev	zel or higher):		
Course	Semester completed Grade Credits		
otal credits completed toward your W	VaGS certificate thus far		
Comments:			