

PORTLAND STATE UNIVERSITY  
INFORMATION FOR APPLICANTS TO GRADUATE CERTIFICATE PROGRAMS

**Admissions Instructions**

Admission to graduate study is selective and is granted on the basis of evidence of suitable preparation and the probability of success in the intended field of study.

Admission to any graduate program requires a minimum of an accredited baccalaureate degree and a GPA which meets university graduate admission standards. For applicants with 0-11 credits of graduate work, the cumulative undergraduate GPA must be 2.75 or higher for regular admission. Applicants with 0-11 credits of graduate work and cumulative undergraduate GPAs between 2.50 and 2.74 may be considered for conditional admission only, at the discretion of the department. An applicant with 12 or more graduate credits must have a cumulative graduate GPA of 3.0 or higher, and this GPA supersedes the undergraduate GPA.

If you are currently admitted to a master's or doctoral program at PSU and currently registered for classes, use the GO-19M or GO-19D form to request addition of the Graduate Certificate program. (You must be in good academic standing.) Submit the form directly to the department, along with any additional materials they require.

All other applicants must submit a single application packet directly to the department.

Failure to supply complete and accurate information will subject you to the University's policies governing academic dishonesty.

**Submit the following materials to the department:**

1. Application for Graduate Certificate Program.
2. \$50.00 non-refundable application fee\* (do not send cash). Authorize credit card payment at the bottom of the application form, or send a check or money order made out to Portland State University.
3. One official transcript, in a sealed (unopened) envelope, from each college and university you have attended.
4. Additional materials which are required by the individual Graduate Certificate program. These may include student statements, test scores, letters of recommendation, or proof of specific educational, occupational, or industrial prerequisites, depending upon the individual program. Consult the department for these requirements.

Admission to a Graduate Certificate program does not guarantee admission to any master's or doctoral program. There is a separate application process for admission to master's and doctoral programs, with an additional application fee and additional materials required. Students fully admitted to a Graduate Certificate program may register for a maximum of 16 credits per term.

\* Fees are subject to change.



# Application for Graduate Certificate Program

## Application for:

\$50.00 non-refundable application fee is required.\* Please fill in your credit card information on the following page or enclose a check or money order made payable to Portland State University.

TERM \_\_\_\_\_ YEAR \_\_\_\_\_

\* Fees are subject to change.

Have you previously applied to or ever attended PSU?

YES NO

Last term attended: TERM \_\_\_\_\_ YEAR \_\_\_\_\_

## BIOGRAPHICAL INFORMATION

1. Social Security Number

(Please see Disclosure and Consent statement located on the following page.)

2. Legal Name

LAST (FAMILY) \_\_\_\_\_ FIRST \_\_\_\_\_ MIDDLE \_\_\_\_\_

3. Other names(s) that may appear on your academic records:

4. Current Mailing Address:

NUMBER AND STREET \_\_\_\_\_ COUNTY \_\_\_\_\_ HOME PHONE ( ) \_\_\_\_\_

CITY \_\_\_\_\_ STATE/COUNTRY/ZIP \_\_\_\_\_ WORK PHONE ( ) \_\_\_\_\_

5. Permanent Address:

NUMBER AND STREET \_\_\_\_\_ HOME PHONE ( ) \_\_\_\_\_

CITY \_\_\_\_\_ STATE/COUNTRY/ZIP \_\_\_\_\_ WORK PHONE ( ) \_\_\_\_\_

6. Gender:

MALE FEMALE

7. Date of Birth:

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
MONTH DAY YEAR

9. Residency:

Are you a U.S. citizen?

YES NO

For tuition purposes, do you consider yourself a:

RESIDENT NON-RESIDENT

If resident, please answer the following questions. Failure to do so may result in your classification as a non-resident.

8. Ethnic Identity (Optional): The state system schools must seek to identify the ethnic background of applicants for admission in compliance with federal reporting requirements. You are encouraged to supply this information but you may decline without prejudicing your application in any way.

H Hispanic/Chicano/Latino

W White, Non-Hispanic

B Black/African American, Non Hispanic

D Decline to Respond

A Asian or Pacific Islander (Specify Ethnic Group)

I American Indian or Alaska Native (Specify Tribal Affiliation)

APPLICANT PARENT/GUARDIAN (if applicant under 21)

Dates of most recent continuous physical presence in Oregon: \_\_\_\_\_ TO \_\_\_\_\_ TO \_\_\_\_\_

List the last two years Oregon income taxes were filed: \_\_\_\_\_

Issue date of your Oregon Driver's License: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
MONTH YEAR

Date of your Oregon Voter Registration: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
MONTH YEAR

Dates of military service, if applicable: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
MONTH YEAR TO \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
MONTH YEAR

Did you enter military service while a resident of Oregon? YES NO

10. List each college or university you have attended (including attendance at PSU) beginning with the most recent. You must provide one official transcript, in a sealed (unopened) envelope, from each institution listed (excluding PSU).

OFFICE USE ONLY	INSTITUTION	LOCATION (CITY & STATE)	DATES ATTENDED MONTH & YEAR	DEGREE RECEIVED/DATE
			TO	/
			TO	/
			TO	/

Employment (Optional):

Name of Employer \_\_\_\_\_ Position \_\_\_\_\_

Address \_\_\_\_\_

---

---

**EMERGENCY CONTACT INFORMATION**

---

---

If you are dependent on your parents, list your parents or legal guardians. If you are not dependent on your parents, list a relative or a friend who can be reached in case of an emergency.

LAST NAME	FIRST	MIDDLE
STREET		HOME PHONE (    )
CITY		
STATE		WORK PHONE (    )
ZIP		

RELATIONSHIP          PARENTS          MOTHER          FATHER          LEGAL GUARDIAN          SPOUSE          FRIEND          OTHER (SPECIFY)

---

---

**GRADUATE CERTIFICATE PROGRAM CODES**

---

---

Please mark the appropriate box beside the Certificate Program to which you are applying:

**Communication (CLAS):**

GPCP: Professional Communication

**Curriculum and Instruction (ED):**

GCCL: Children and Young Adult Literature

**Economics (CLAS):**

GCAE: Applied Energy Economics

**Engineering & Computer Science (CECS):**

GCCD: Analog and Microwave Circuit Design

GCCS: Communication Systems

GCCA: Computer Architecture & Design

GCDA: Design Automation

GCDD: Digital Design

GCDS: Digital Signal Processing

GCIP: Image Processing

GCCT: Integrated Circuit Test, Verification & Validation

GCLO: Lasers & Opto-electronics

**Environmental Sciences & Resources (CLAS):**

GCHY: Hydrology

**Geography (CLAS):**

GCGI: Geographic Information Systems

**Geology (CLAS):**

GCES: Earth & Space Sciences for K-12 Educators

GCEG: Engineering Geology

GCVG: Environmental Geology

GCHG: Hydro-Geology

**Institute on Aging (CUPA):**

GRNC: Gerontology

**Mathematics (CLAS):**

GCAS: Applied Statistics

GCMS: Mathematics for Middle School Math Teachers

**Special and Counselor Education (ED):**

GCAC: Addictions Counseling

GCMF: Marriage and Family Counseling

**Systems Engineering Program (CECS):**

GCSE: Systems Engineering Fundamentals

**Systems Science Program:**

GCCI: Computational Intelligence

GCCM: Computer Modeling and Simulation

**Urban Studies and Planning (CUPA):**

GCRE: Real Estate Development

---

---

**Social Security Number Discloser and Consent Statement**

You are requested to provide voluntarily your Social Security Number to assist OUS (and organizations conducting studies for or on behalf of OUS) in developing, validating, or administering predictive tests; administering student aid programs; improving instruction; internal identification of students; collection of student debts; or comparing student educational experiences with subsequent workforce experiences.

OUS will disclose your Social Security Number only in the studies are conducted in a manner that does not permit personal identification of you by individuals other than representatives of OUS (or the organization conducting the study for OUS) and only if the information is destroyed when no longer needed for purposes for which the study was conducted. By providing your Social Security Number, you are

consenting to the uses identified above. This request is made pursuant to ORS 351.070 and 351.085. Provision of your Social Security Number and consent to its use is not required and if you choose not to do so you will not be denied any right, benefit, or privilege provided by law. You may revoke your consent or the use of your Social Security Number at any time by writing to the Director of Admissions.

---

I certify that all statements on this application are complete and true. I also understand that if I am admitted and do not enroll for the term to which I am admitted, I will need to update my application within one year by notifying my department in writing; otherwise, I will submit a new application and non-refundable application fee.

---

APPLICANT'S SIGNATURE

DATE

---

**For payment of application fee by credit card:**          \$50.00 certificate admission

Cardholder Name: \_\_\_\_\_  
(Please Print)

Card Type:          MC          VISA

Card Number: \_\_\_\_\_

Card Expiration Date: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_

---

**PORTLAND STATE UNIVERSITY, P.O. BOX 751, PORTLAND, OR 97207-0751**

**SUBMIT COMPLETED APPLICATION AND OFFICIAL TRANSCRIPT TO ACADEMIC DEPT. GRANTING THE CERTIFICATE (SEE ABOVE)**

---