



Certificate Program: Health Careers Preparation (42-51 credits)

Last _____ **First** _____ **Middle** _____
Name on Diploma will be printed as it appears on academic transcript.

ID No -- Hunter e-mail address: _____

Audit report/status will be sent to your Hunter e-mail address and e-sims account

Expected semester of Graduation (FILL IN YEAR) Summer _____ Fall _____ Spring _____

Undergraduate Certificate Program: Health Careers Preparation

(check one) Track (Science Preparatory Program) or Track (Science Enrichment Program)

Student Signature _____ **Date** _____

<i>Major Requirements</i>				
Course Prefix & Number	Course Title	Credits	Semester (Circle One)	Year Taken
SERVICE OBLIGATION				
STCS 318 (Pseudo course)			Fall Spring Summer	
ONE YEAR OF COLLEGE ENGLISH				
ENGL		3	Fall Spring Summer	
ENGL		3	Fall Spring Summer	
ENGL		3	Fall Spring Summer	
ONE YEAR OF COLLEGE MATH BEYOND PRE-CALCULUS				
MATH/STAT		3	Fall Spring Summer	
MATH/STAT		3	Fall Spring Summer	
MATH/STAT		3	Fall Spring Summer	
<i>Track Requirements (38 credits) list courses below</i>				
			Fall Spring Summer	
			Fall Spring Summer	
			Fall Spring Summer	
			Fall Spring Summer	
			Fall Spring Summer	
			Fall Spring Summer	
			Fall Spring Summer	
			Fall Spring Summer	
			Fall Spring Summer	
			Fall Spring Summer	
			Fall Spring Summer	
			Fall Spring Summer	

Chair/Advisor Signature **Date**

Chair/Advisor Name (Please Print)

E-mail address

Department Stamp