

STEPHEN F. AUSTIN STATE UNIVERSITY

Office of the Registrar

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NOTIFICATION OF CERTIFICATE AWARD

To be used for SFA issued certificates only - Return information listed above

Student Name:		
Last	First	Middle
Campus ID#:		
Certificate Awarded By:		
College:	Department:	
Certificate Name:		
Date of Award (must be the last da	y of award term):	
Required Signatures:		
	Dept. Head Printed Name	Date
	 Dept. Head Signature	
	, ,	
	Dean Printed Name	Date
	 Dean Signature	