LSU | **Pinkie Gordon Lane**
Graduate School

Online Graduate Certificate Degree Audit

Email submission to gradsvcs@lsu.edu.

Student Information:

LSU Student ID: Phone:

Name: LSU Email:

Home Department: Program Certificate:

Coursework Information:

List all relevant LSU courses and hours required toward this certificate.
(Ex: EDCI 7055 (3), ECI 7930 (6)

Courses Completed at LSU:

Courses Transferred or Petitioned (list institution and date taken)   Hours Completed: _____

Courses Remaining: Hours Remaining: _____

Signatures:

Student: _____   Date: _____

Graduate Program Advisor: _____   Date: _____

Dean of the Graduate School: _____   Date: _____

For Office Use Only:

GPA: REG: TIME: CW: