

**Undergraduate Certificate in National Security Studies Application**

**Applicant Information**

Full Name:		Date:	
<i>Last</i>	<i>First</i>	<i>M.I.</i>	
Panther ID:		Email Address:	
Address:			
<i>Street Address</i>			
<i>City</i>		<i>State</i>	<i>ZIP Code</i>
Home Phone: ( )		Cell/Work Phone: ( )	
Academic Major		Expected Graduation Date: Term Year	
US Citizen	Yes No	Do you speak any foreign Languages: Yes No If so, which ones:	
Current GPA:		First Generation College Student? Yes No	

**Certificate Courses**

	Course No.	Course Title	Term/Year	Grade or IP (In Progress)
Skill Requirement				
Core Requirement				
Core Requirement				
National Security Studies				
Elective				
Elective				

**Foreign Language Requirement**

	Course No.	Course Title	Term/Year	Grade or IP (In Progress)
Foreign Language				
Foreign Language				
Foreign Language				

*Foreign Language Proficiency may also be demonstrated through a proficiency examination by the FIU Department of Modern Languages. Should you elect to demonstrate proficiency through examination, you must present a copy of the exam results prior to certificate completion.*

	Test Name	Date Taken	Score
Test Taken			

**Disclaimer and Signature**

*I certify that my answers are true and complete to the best of my knowledge.*

*I understand that false or misleading information in my application may result in denial of my application.*

Applicant Signature:		Date Signed:	
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**PLEASE SEND OR DROP OFF COMPLETED APPLICATION TO:**

**ACADEMIC PROGRAMS**

*Jack D. Gordon Institute for Public Policy*

*Florida International University*

*11200 SW 8th Street*

*Modesto Maidique Campus (MMC) LC 220*

*Miami, FL 33199*

*Fax: (305) 348-2924*

*ADVISOR: Hector Cadavid, [hcadavid@fiu.edu](mailto:hcadavid@fiu.edu)*

**Do not write on the space below**

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**FOR OFFICIAL GORDON INSTITUTE USE ONLY**

The student's academic credentials have been reviewed and the student is hereby:

Accepted into the Certificate Program

Not accepted into the Certificate Program

Authorized Name and Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Academic Programs Director (please print name)

Jack D. Gordon Institute for Public Policy  
Florida International University  
Undergraduate Certificate Application