



Graduate Application for Certificate Completion

Return completed form to the Registrar's Office (Swords Hall, Room 11) or by emailing to registrar@bradley.edu.

ID Number: _____

Legal name as it should
appear on your certificate:

First Middle Last

Contact Information:

Email* Phone

Certificate Mailing Address:

Street City State Zip

I will complete all of my requirements: Month: _____ Year: _____

I would like to earn my certificate: May 17, 2025 August 25, 2025 December 20, 2025

Certificate sought:

Post-Baccalaureate Certificate in Management
Principal Licensure in Educational Administration
Post-Master's Certificate in Neurocounseling
Post-Master's Certificate in Nursing Education
Post Master's Certificate in Psychiatric Nurse Practitioner
Post-Master's Certificate in Family Nurse Practitioner

Program/Major: _____

*Please note that, per graduate policy, certificate students do not participate in the University-wide commencement ceremony.
Individual colleges or departments may hold their own celebrations. Please contact your department for more information.*