BRADLEY University

Graduate Application for Certificate Completion

Return completed form to the Registrar's Office (Swords Hall) 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 16, 2026
- ○ August 24, 2026
- December 19, 2026

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.