COLUMBUS STATE

INFORMATION SYSTEMS TECHNOLOGY

Petition to Receive Certificate

Instructions:

- Submit form to Department Office, Eibling Hall 312 or infotech@cscc.edu.
- The IST Department will verify that all course requirements have been met.
- Certificates will be mailed to the address provided on form.

Name (To be printed exactly as you want it on certificate)				Cougar ID number	
Address	City	State	Zip	Telephone	
E-mail					
Student Signature	: Signature Date				
Completion Semester: AU	SP SU	Year:			
Which certificate(s) are yo	ou requesting?				
CCNA Routing & Switching (CCNAv7)	Computer Literacy	☐ Data Analytics		Data Center Technician	
☐ Database Specialist	☐ IT Security Stackable	☐ IT Su	pport Stackable	☐ IT Technician Stackable	
Linux Stackable	Management Information Systems (MIS)	Mobile Game Apps		Network Administrator	
Software Developer					
Program Coordinator's Si	gnature Date	Chairpe	rson's Signature	Date	

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