San Francisco State University College of Extended Learning

MULTIMEDIA STUDIES PROGRAM

For Office Use Only

Chk. No.
Date Received:
App. Processed:
Registration Processed:

Graduation Application for MSP Certificate of Completion

Student Information

Name

First *Last*

SFSU ID #

Address

Street *City* *Zip Code*

Phone

Day *Evening*

Email

Reapplying?

1st time *2nd time*

Graduation

Semester *Year*

Classes Completed

Module 1		Module 2		Module 3/Electives	
Name	*Semester/year**	*Name*	*Semester/year**	*Name*	*Semester/year**

Semester/year

Effective Resume Writing

Semester/year

Portfolio Development

***Please abbreviate: Semester: spr/sum/fall; Year: 98/99/00/01/02 (etc.)**

Attach these items

☐ **$50 application fee** ***or***

☐ **$25 re-application fee**

Non-refundable - check or money order only, made payable to SFSU - CEL

☐ **Unofficial Transcripts**

To download, go to: https://www.sfsu.edu/online/login.htm -
enter the requested login and click "get my information choices"
THEN choose from the list: "Unofficial Transcripts"

For Office Use Only

☐ **Approved**

☐ **Not Approved**

Advisor's Signature

Date

Notes