

133-143 John Hope Franklin Center 2204 Erwin Road, Box 90254 Durham, NC 27708 Phone: +919.681.3983 Email: las@duke.edu

## **Undergraduate Certificate Application**

Last or Family Name (print)	First	Middle	
2. Current Mailing Address:			
# 6	and Street		
	ty, State, Zip		
<ol> <li>Telephone number(s) at which</li> </ol>		ed: Day () Evening ()	
I. E-mail address:			
<ol> <li>Desired year and term of enrol Year 20;FallSpring</li> </ol>			
5. What is your major:			
7. Anticipated graduation date (m	nonth and year): _		
ture of Applicant			

Students should return application to the coordinator of the certificate program in which you are applying to enroll. For CLACS that is Patrick Semmler (patrick.semmler@duke.edu).

Undergraduate students must also contact the Registrar's office: 919-684-2813 or registrar@duke.edu to officially enroll in the undergraduate certificate program.