



Short-Term Certificate

Welding Technology - Beginning Welding Certificate

Details

Completion Award: Short-Term Proficiency Certificate
Program Code (EPC): 814A

Program Coordinator (contact with questions)

Jeramie O'Dell (360) 417-6541
Office: Q-14 jodell@pencol.edu

Student's Name:

Student ID Number:

Advisor:

Advisor's Signature:

Table with 6 columns: Degree Requirements, Approved Substitutions, Name Of Course, Credits, Credits Completed, In Progress Qtr/Yr. Row 1: WELD 110, Beginning Welding & Metal Fabrication I, 15. Summary row: CREDITS REQUIRED FOR CERTIFICATE: 15.

The following information is needed to produce your certificate:

Quarter and year certificate was completed: [] Fall [] Winter [] Spring [] Summer 20__

Name to be printed on certificate: _____
First Middle Last

Mailing Address: _____
Street/P.O. Box City State Zip

If no mailing address is provided, Certificate may be picked up at the Reception desk in the Student Services Bldg.

For Office Use:

[] Grades verified Date Certificate Posted: _____ Processed By: _____
[] Certificate Mailed or [] Forwarded to Program Advisor