PENINSULA COLLEGE

## Short-Term Certificate

# Computer Applications Technology - Computer Applications I

**Details**

| | |
|---|---|
| **Completion Award:** | Short-Term Proficiency Certificate |
| **Program Code (EPC):** | MIAC1C01 |

**Program Coordinator** (contact with questions)

Tanya Knight      (360) 417-6242
Office: C-210

| **Student's Name:** | **Student ID Number:** |
|---|---|
| **Advisor:** | **Advisor's Signature:** |

| Degree Requirements | Approved Substitutions | Name Of Course | Credits | Credits Completed | In Progress Qtr/Yr |
|---|---|---|---|---|---|
| CAT 111 | | **Intro to Microsoft Windows** | 5 | | |
| MEDIA 111 | | **Intro to Multimedia for the Web** | 5 | | |
| CAT 130 | | **Intro to Microsoft Word** | 5 | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | **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