

MUST BE RETURNED TO THE CSIS DEPARTMENT FOR PROCESSING

REC'D AT FRONT COUNTER BY _____

DATE REC'D _____

PETITION FOR CERTIFICATE

MICROSOFT AZURE

9 units – Minimum of "C" Required in Each Course Santa Monica College

PRINT YOUR NAME:

PRINT YOUR NAME EXACTLY AND IN THE ORDER YOU WANT IT TO APPEAR ON YOUR CERTIFICATE

ADDRESS:

(to mail certificate) Street Apt. No. City State or Foreign Country Zip Code

SMC ID. #: _____ DATE OF BIRTH: _____ TELEPHONE: _____
(required)

EMAIL ADDR: _____ CELL PHONE: _____

Note: Students who do not complete certificate requirements during filing period must re-apply.

If using coursework from other college(s), please indicate name(s) of institution(s):

Note: Students need to attach copies of transcripts from other schools when submitting this application.

Student Signature: _____ Date _____
(Required)

FOR OFFICE USE ONLY

Do Not Write Below this Line Do Not Write Below this Line Do not Write Below this Line

Required Courses (9 Units):

Course (units)	*Substitute Course/School	Sem./Year	Grade	Units	Need
CS 79A, Introduction to Cloud Computing (3)					
CS 79Z, Microsoft Azure Essentials (3)					
Select ONE from these electives: CS 33, C # Programming (3), or					
CS 79Y, Microsoft Azure Database Essentials (3), or CS 82, ASP.NET Programming in C# (3), or					
CS 83R, Server-Side Ruby Web Programming (3), or CS 87A, Python Programming (3)					

*To be done in consultation with department chair or designated coordinator.

Rec'd: _____ Dept. Chair: _____
Granted: _____ Denied: _____ Entered: _____
Printed: _____ Signed: _____ Mailed: _____