THE UNIVERSITY OF BRITISH COLUMBIA
Graduate and Postdoctoral Studies

Office of the Dean and Vice-Provost
Student Academic Services
grad.ubc.ca | graduate.sas@ubc.ca

GRADUATE CERTIFICATE AND DIPLOMA PROGRAM COMPLETION

This form may be used in lieu of a program completion memo to the Faculty of Graduate and Postdoctoral Studies

STUDENT INFORMATION:	**Student Number:**
Given Name:	**Family Name:**
Email:	
☐ **Graduate Certificate OR** ☐ **Graduate Diploma**	**Program:**

The undersigned verifies that the above student has completed all program requirements.

Name of Graduate Advisor / designate	Signature of Graduate Advisor / designate	Date (yyyy/mm/dd)

NOTE: The student's program cannot be closed until all grades have been entered.

For Concurrent Certificates and Diplomas: G+PS will record that the student's certificate or diploma requirements have been satisfied, but the program will not be formally closed in Workday and the credential will not be granted by Senate until the student's degree program is also complete.

Student completed program requirements on this date (yyy/mm/dd)**:** _____

Comments:

Graduate Studies use only:

Date Program Closed (yyyy/mm/dd)	Signature of Coord., Curriculum & Credential Programs