

**UNIVERSITY OF MASSACHUSETTS LOWELL  
CONTINUING STUDIES AND CORPORATE EDUCATION**

**MANUFACTURING TECHNOLOGY**

**CERTIFICATE AWARD PETITION**

*(SUBMIT AFTER CERTIFICATE APPLICATION HAS BEEN ACCEPTED AND REQUIRED COURSES HAVE BEEN COMPLETED)*

Name _____	Date Submitted _____
Address _____ (street)	Student ID _____
_____ (city) (state) (zip code)	Tel. No. _____
	Email Address: _____

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**ADMISSIONS INFORMATION**

Undergraduate Degree \_\_\_\_\_ Major \_\_\_\_\_

School \_\_\_\_\_ Date Received \_\_\_\_\_

Intended Degree at UML, if any: \_\_\_\_\_

Do you want counseling about a degree program? \_\_\_\_\_

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**COURSE METHOD (Check)**

*On Campus*     *Off Campus*     *Online*     *Mixed*

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**SEVEN COURSES SUBMITTED TOWARD CERTIFICATE (Check)**

*Students must have attained a 2.0 grade point average in order to receive a certificate.*

**REQUIRED COURSES (7)**

- |   |  |
|---|--|
| <input type="checkbox"/> 23.101 Engineering Graphics                | <input type="checkbox"/> 23.314 Manufacturing Productivity   |
| <input type="checkbox"/> 23.200 Computer-Aided Drafting (CADrf)     | <input type="checkbox"/> 23.414 Engineering Economics        |
| <input type="checkbox"/> 23.301 Manufacturing Technology Laboratory | <input type="checkbox"/> 23.419 Computer Aided Manufacturing |
| <input type="checkbox"/> 23.305 Manufacturing Processes             |  |

**SUBSTITUTED COURSE OR TRANSFER COURSE (only one course permitted)**

Course Name \_\_\_\_\_ College where taken \_\_\_\_\_ Year \_\_\_\_\_

Substituted for UML Course \_\_\_\_\_

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**SIGNATURE REQUIRED:**

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*Student Signature / Date* *Program Coordinator / Date*