

**Graduate Certificate in National Security Studies Application**

Applicant Information					
Full Name:				Date:	
	<i>Last</i>	<i>First</i>	<i>M.I.</i>		
Panther ID:			Email Address:		
Address:					
	<i>Street Address</i>			<i>Apartment/Unit #</i>	
	<i>City</i>			<i>State</i>	<i>ZIP Code</i>
Home Phone:	( )	Cell/Work Phone:	( )		
Academic Major:			School/College:		
Expected Graduation Date:		Date of Birth:			
Do you speak a foreign language? If so, which ones?					

Certificate Courses				
	Course No.	Course Title	Term/Year	Grade or IP (In Progress)
Skill Requirement				
Core Requirement				
Core Requirement				
National Security Studies				
Elective				
Elective				

Foreign Language Requirement				
	Course No.	Course Title	Term/Year	Grade or IP (In Progress)
Foreign Language				
Foreign Language				
Foreign Language				

*Foreign Language Proficiency may also be demonstrated through a proficiency examination by the FIU Department of Modern Languages. Should you elect to demonstrate proficiency through examination, you must present a copy of the exam results prior to certificate completion.*

	Test Name	Date Taken	Score
Test Taken			

Disclaimer and Signature			
<i>I certify that my answers are true and complete to the best of my knowledge.</i>			
<i>I understand that false or misleading information in my application may result in denial of my application.</i>			
Applicant Signature:			Date Signed:

**PLEASE SEND OR DROP OFF COMPLETED APPLICATION TO:**

*ACADEMIC PROGRAMS*

*Jack D. Gordon Institute for Public Policy*

*Florida International University*

*11200 SW 8th Street*

*Modesto Maidique Campus (MMC) LC 220*

*Miami, FL 33199*

*Fax: (305) 348-2924*

*ADVISOR: Hector Cadavid, [hcadavid@fiu.edu](mailto:hcadavid@fiu.edu)*

**Do not write on the space below**

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**FOR OFFICIAL GORDON INSTITUTE USE ONLY**

The student's academic credentials have been reviewed and the student is hereby:

Accepted into the Certificate Program

Not accepted into the Certificate Program

Authorized Name and Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Academic Programs Director (please print name)

Jack D. Gordon Institute for Public Policy  
Florida International University  
Graduate Certificate Application