Application for the Undergraduate Applied Statistics Certificate
Department of Mathematical & Statistical Sciences
University of Colorado Denver

Please print or type the following information.

Contact information:

Name (last, first, middle): _____

Address: _____

Student ID (if you are already enrolled): _____

Phone: _____

E-mail: _____

[ ] Add to mailing list for notices and announcements [ ] Do not add to mailing list

Student signature for application:

_____ _____
Signature Date

If you have *already been admitted* to the University as a **degree-seeking student**, send the following to the Department of Mathematical & Statistical Sciences (address below):

- This application, completely filled out (with dated signatures).

If you have *already been admitted* to the University as a **non-degree seeking student**, send the following to the Department of Mathematical & Statistical Sciences (address below):

- This application, completely filled out (with dated signatures).
- All official transcripts.

If you are *applying for admission* to the University as a non-degree seeking students, send the following to the Department of Mathematical & Statistical Sciences (address below):

- This application completely filled out (with dated signatures).
- A completed non-degree application (available at www.cudenver.edu).
- A non-refundable application processing fee of $25 by check payable to *UCDHSC*.
- All official transcripts.

Department of Mathematical & Statistical Sciences
University of Colorado Denver
P.O. Box 173364, CB 170
Denver, CO 80217-3364

If you have any questions, contact Dr. Stephanie Santorico, 303-556-2547, Stephanie.Santorico@ucdenver.edu.

For department use only:

Accepted into the Undergraduate Applied Statistics Certificate program beginning
[ ] Fall 20__ [ ] Spring 20__

Approved by:

_____ _____
Signature Date Date

Student signature upon completion of certificate:

_____ _____
Signature Date Date

Faculty signature upon completion of certificate:

_____ _____
Signature Date

Date certificate completed: _____