

Graduate Certificate in Quantitative Methods (GCQRE)
University of Memphis

Certificate Completion Form

Name: _____

U Number: _____ Degree Program: _____

E-mail: _____ Phone Number: _____

Please list your completion of the 15-credit requirement:

Core Courses (6 credits)

<i>Course</i>	<i>Grade and Year of Completion</i>
----------------------	--

EDPR 7/8542: Statistical Methods Applied to Education II _____

EDPR 7/8511: Introduction to Measurement and Evaluation _____

Elective (9 credits)

<i>Course name</i>	<i>Grade and Year of Completion</i>
---------------------------	--

_____	_____
-------	-------

_____	_____
-------	-------

_____	_____
-------	-------

Number of semesters took for completion: _____

Academic department: _____

Expected graduation date: _____

Major professor: _____

Signature of Certificate Coordinator

Date

Submit a hard copy of this application to Melynda Whitwell, 100 Ball Hall, College of Education, Health and Human Sciences, University of Memphis.