



Application

Name

Application Date

Social Security Number (last four numbers)

E-mail Address

Telephone

Mailing Address

City

ST

Zip Code

Graduate Status (Check One)

- Currently pursuing a Graduate degree
- Currently accepted as a Non-Degree Seeking Student
- Applied for admission as a Non-Degree Seeking Student (Date of admissions application _____)
- Undergraduate obtaining permission to register for graduate courses

The 12 hour certificate program takes 4 semesters. I plan to complete it by:

My present job title and organization are:

Please state your personal reasons for wanting to be in the program in the Statement of Professional Career Goals document.

Event Management Certificate Program Application

I have read and understand the published provisions for admission, satisfactory completion and course program.

The following documents must be submitted at the time of application as attachments and emailed to rprince@fsu.edu. These documents are considered part of your official application. You can also mail them to:

Rosemary Prince, MS, CPRP
Event Management Certificate Program Coordinator
Florida State University
P.O. Box 3061272
Tallahassee, Florida 32306-1272

- Two Letters of Recommendation
- Current Resume
- Statement of Professional Career Goals