



Office Use Only:	
_____	SHARQTC
_____	BDMS
In-Full	In-Part

GENERAL EDUCATION (CSU or IGETC) CERTIFICATION REQUEST

Student ID Number: **W** _____

Name _____
Last First Middle

Street _____ Apt/Unit # _____

City _____ State _____ Zip Code _____

Phone _____ Email _____

Select only one:

Please send a **CSU GE Certification** to this CSU Campus: _____

or

Please send an **IGETC Certification** to: this CSU Campus: _____

this UC Campus: _____

Transfer students to UC must fulfill the LOTE (*Language Other Than English*) requirement. If you are using high school coursework please provide an official transcript.

PROCESS: NOW AFTER _____ SEMESTER 20 _____

READ CAREFULLY BEFORE COMPLETING THIS FORM:

- (1) Request that CSU-GE or IGETC certification be sent to the **one** university you have committed yourself to attend **after** you have been accepted for admission.
- (2) Certifications are mailed directly to the university.
- (3) There is no charge, but Las Positas College issues only one certification per student.
- (4) Processing time may be delayed due to registration, graduation, grading periods, "in progress" classes, staffing, missing documents (including official transcripts from other colleges and official AP grade reports), etc.
- (5) It is highly recommended that you see a counselor for a preliminary review before submitting this request.

Please allow 2-4 weeks for a response.

By signing below, I certify that my application is complete and accurate. I am responsible for knowing the information provided.

STUDENT SIGNATURE _____ DATE _____

Submit this form to:

Mail to: Las Positas College, Office of Admissions & Records, 3000 Campus Hill Drive, Livermore, CA 94551
 Fax to : 925.606.6437.