<u>DeSales University</u>

ACCESS Certificate Application

(This certificate may not be construed as a baccalaureate degree.)

| Name | | | | |
|---------------------------|-------|------|-------|--------|
| | Last | | First | Middle |
| | | | | |
| Mailing address | | | | |
| | Stree | t | | |
| | City | | State | Zip |
| Phone | City | | State | Zip |
| | Cell | Work | Home | |
| ID # or Social Security # | | | | |

Courses required for Certificate in Theology (6 Courses)

| | | Date |
|--------------------------|---|-----------|
| Course # | Course Title | Completed |
| TH109 | Catholic Theology | |
| TH232 or TH234 | The Gospels, The Old Testament (circle appropriate course) | |
| TH350 or TH364 | The Church and Sacraments, Evangelization and the Family (circle appropriate course) | |
| TH260 or TH261 or TH 262 | Marriage and the Family, Sexual Morality, Medicine and Morality (circle appropriate course) | |
| TH362 | Jesus Christ | |
| TH499 | Independent Study in Theology | |

Note: No more than half of the total number of credits may be transferred to meet the requirements of the certificate

| I acknowledge that I have received and read the <u>Gainful Employment Disclosure</u> for the Ce | rtificate in Theology. (Please Initial) |
|---|---|
| Student Signature | Date |
| Advisor Signature | Date |
| Division Head Signature | Date |
| Executive Director of Lifelong Learning Signature | Date |

Application to be completed prior to pursuing Certificate. Certificate awarded upon completion of relevant coursework and payment of all fees.

| Original to Registrar | Copies to Business Office and ACCESS | 9/24/19 |
|-----------------------|--------------------------------------|---------|
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