



Name:

Semester of Entry:

Program Requirements: Advanced Certificate in Public Health Geriatrics

Required Courses (15 credits)

Term Planned	Term Completed	Grade Earned	Course#	Course Title	Credits
_____	_____	_____	EPID 5305	Epidemiology of Aging	3
_____	_____	_____	HPMG 5315	Legal Issues in Aging and Health	3
_____	_____	_____	EPID 5200	Principles of Epidemiology	3
_____	_____	_____	CHSC 5206	Program Design and Evaluation	3
_____	_____	_____	PUBH 5201	Public Health Leadership and Interprofessional Practice	3

Anticipated Date of Graduation (Circle Month): May August December **YEAR:** _____

I acknowledge that the courses listed above are the courses I am required to successfully complete to be awarded the Advanced Certificate in Public Health from the State University of New York Downstate Medical Center. The academic policies regarding other components of the degree are published in the SUNY DMC **Student Handbook** and the **SPH Supplemental Student Handbook**, and should be reviewed to ensure my academic success.

Signature of Student

Date

Signature of Faculty Advisor

Date