|  |  |
| --- | --- |
| Student Name (as it should appear on the certificate): | Campus: |
| Student ID number: | Expected date of graduation (month and year): |
| Campus Email:  | Major: |
| Permanent Email (best way to contact you after graduation): | RHRJ Advisor Name and Department: |
| Phone: |
| Permanent Address (certificate is mailed to the address provided, normally in July following the date of graduation): |

* Certificate candidates are encouraged to consult with an RHRJ advisor regularly to plan coursework and completion of requirements.
* **COURSES**: The six courses must include at least one foundational course, one transnational/global course and one upper-level course (300 level or above) from the approved Certificate course list. Courses not on the approved course list may count toward the Certificate at the discretion of the student’s RHRJ advisor.
* **SPECIAL PROJECT**: The special project must be approved by the student’s RHRJ advisor.
* **REQUIREMENT SUBSTITIONS:** Unusual circumstances may warrant substituting certificate requirements; a candidate, through an RHRJ advisor, may petition for adjustments **at least one full semester before graduation**. A successful petition will satisfy the interdisciplinary character of the certificate program.
* **DEADLINE FOR SUMITTING DOCUMENTS TO RHRJ ADVISOR:** Please submit **(1) this completed form (2) an unofficial copy of your transcript (3) special project essay (3-5 pgs.) & (4) special project supervisor evaluation** by **November 1st** for Fall graduates and **April 1st** for Spring graduates.

**For more information about certificate requirements see the program website https://www.fivecolleges.edu/reproductive-health-rights-justice/**

**Approval of Award of Certificate:**

The aforementioned student has completed all of the requirements for the Reproductive Health, Rights, and Justice Certificate.

**Advisor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Section A: 6 Required Courses**Each course must earn 3 or more semester credits. For both pass/fail & graded courses, students must pass the course for it to count toward the Certificate.

Courses not on the approved course list may count toward the Certificate at the discretion of the student’s RHRJ advisor. **Check one box**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Campus** | **Course Title** | **Department** | **Course #** | **Semester****Fall/Spring** | **Year** | **Credits** | **Standard Certificate Course****(on course list)** | **Non-Standard Course Approved by Advisor** |
| **A. Foundational Course (at least one)** |  |
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| **B. Transnational/Global Course (at least one)** |  |
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| **C. Upper Level Course, 300 or above (at least one)** |  |
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| **D. Additional Courses**  |  |
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**Section B. Required Special Project**

This requirement may be completed through an independent study, thesis, Division III or other course work that engages issues of reproductive health, rights or justice and meaningfully incorporates the perspectives of community-based groups or organizations.

 **Advisor’s Approval of the Project (signature) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Which of the following best describes the type of project (check one):**

□ Course Project □ Independent Study □ Thesis □ Division III Project □ Internship □ Other

**Description of the project:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Project beginning and end date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Project location(s) and/or community partners:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name of project supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student has submitted the following to their RHRJ Advisor, along with this form:**

 **Unofficial Transcript:** □  **Yes** □  **No**

 **Supervisor’s Evaluation:** □  **Yes** □ **No**

Submit completed Special Project Supervisor Evaluation Form (available on the Certificate website) **OR** a letter, email, or other type of evaluation from the supervisor stating what work the student completed and that it was completed satisfactorily

 **Special Project Reflection Essay (approximately 3-5 pgs.)** □  **Yes** □  **No**Please describe your special project and reflect on your experience and the project’s relevance to reproductive health, rights, and justice issues, including course-work completed for the certificate. Consider: How did the special project inform your understanding of RHRJ issues and communities affected by and/or engaged with the topic of the special project? What aspects of the special project were most valuable and why? What insights did you gain about yourself ? What did the special project confirm or illuminate about your future goals?

**Section C: Post Graduation***(This section is not required to earn the Certificate, any information you wish to provide is greatly appreciated.)*
What is the best way to contact you after graduation? (Email address, phone, and/or mailing address)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What are your post-graduation plans? □ Job □ Graduate Program □ Fellowship □ Other

Please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
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**Section D: Certificate Website & Promotional Materials**

We use the RHRJ Certificate website and other promotional materials to communicate with potential students about the value of obtaining a Certificate. Student testimonials are often the most effective way to demonstrate this value. May we use a section of your special project essay on the website and in these materials (i.e. 1-4 sentences that speak to the impact the Special Project/Certificate had on you, your life plans etc.)?

□ Yes, you can use a section my essay along with my name and year of graduation

□ Yes, but not with my name or year of graduation

□ Yes, but only if you contact me via email and show me what section you want to use (email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

□ No, I’m not comfortable having any part of my essay used in promotional materials

**Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Instructions to Certificate Advisor for Evaluating Award of Certificate:**

1. Meet with the student to review requirements and ensure this form is completed fully and accurately, including an email where the student may be contacted after graduation.
2. Confirm that the student has **successfully met the following course requirements** by reviewing this form, the student’s unofficial transcript, and the course lists (see Certificate website for current and archived course lists: <https://www.fivecolleges.edu/reproductive-health-rights-justice/courses>)
	1. One foundational course
	2. One transnational/global course
	3. One upper level course (300 or above)
	4. 3 additional courses

**Note:** In order to protect the student’s privacy and because electronic communications are not considered sufficiently secure, please **DO NOT** (1) include specific grades on this form or (2) email student’s grades or transcripts to Five Colleges, Inc.

1. Confirm student has **successfully completed a special project** and written a satisfactory 3-5 page reflection essay.
2. If Certificate requirements are met**,**please
	1. sign and date this completed form (pages 1 and 3)AND
	2. **email (1) this form AND (2) student’s special project** **essay** to Linda Hillenbrand, Certificate Program Assistant lindah@wost.umass.edu and Five Colleges at fcacademics@fivecolleges.edu.
	3. submit by **December 10** for Fall graduates and by **May 1st** for Spring graduates.

\*\*Completion documents should be emailed only during the semester the student is graduating, even if the student completes all Certificate requirements before the graduation semester.

1. After graduation, the certificate award will be noted on the student’s transcript by the appropriate campus registrar.