



**University of Massachusetts Lowell**  
 Division of Graduate, Online & Professional Studies  
 One University Avenue  
 Lowell, MA 01854-2881

# Multimedia Applications Certificate Program

## Certificate Award Petition

<b>Student Information</b>	Name:	Date Submitted:
	Address Line 1:	Student ID #:
	Address Line 2:	Telephone:
	City:                      State:              Zip:	Email:

<b>Admissions Information</b>	Undergraduate Degree:	Major:
	School:	Date Received:
	Intended Degree at UML, if any:	Do you want counseling about a degree program? <input type="checkbox"/> Yes <input type="checkbox"/> No

<b>Course Method:</b>	<input type="checkbox"/> On Campus <input type="checkbox"/> Off Campus <input type="checkbox"/> Online <input type="checkbox"/> Mixed
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### Courses Submitted Toward Certificate

*Please Note: Students must have attained a minimum 2.0 grade point average in order to receive a certificate.*

<b>Required Courses: (4)</b>	<input type="checkbox"/> INFO.2300 Introduction to Multimedia <input type="checkbox"/> INFO.2310 Graphics for Multimedia and the World Wide Web <input type="checkbox"/> INFO 3060 Intro to XML OR INFO.2320 Desktop Video Production <input type="checkbox"/> INFO 2380 Website Development OR INFO.2470 Web Authoring
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<b>Electives: (2)</b>	<input type="checkbox"/> GRFX.2000 Introduction to Graphic Design <input type="checkbox"/> GRFX.2030 Photographic Imaging <input type="checkbox"/> GRFX.2040 Computer Graphics & Illustration <input type="checkbox"/> GRFX.2120 Website Design <input type="checkbox"/> GRFX.3120 Advanced Website Design <input type="checkbox"/> INFO 2380 Website Development ( <i>if not already taken as a required course</i> ) <input type="checkbox"/> INFO.2500 E-Commerce <input type="checkbox"/> INFO.2910 Introduction to HTML <input type="checkbox"/> INFO.3060 Introduction to XML ( <i>if not already taken as a required course</i> ) <input type="checkbox"/> INFO.3460 Digital Media Delivery
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<b>Substituted or Transferred Course</b> <i>(only one course permitted)</i>	Course Name:	College Where Taken:	Year:
	Substituted for UML Course:		

<b>Signatures</b>	Student Signature:	Date:
	Program Coordinator Signature:	Date:

**Send completed form to:** University of Massachusetts Lowell, Division of Graduate, Online & Professional Studies, One University Avenue, Lowell, MA 01854-2881. **Questions?** Call our Advising Center at 1-800-480-3190 for assistance, or check out our website at <https://gps.uml.edu>.

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