



Central Ohio Technical College

The Gateway – Student Records

1179 University Drive, Newark, OH 43055
Phone: 740-364-9594 ■ Fax: 740-366-9160
cotcrecords@mail.cotc.edu

Petition for COTC Certificate

Submit this form to The Gateway to request that COTC issue an internal certificate. The form must be filed no later than the start of the semester in which the student completes the last class required for the certificate.

Use a separate petition for each certificate.

Do not use this form for One-Year (.1YR) Certificates.

Last Name First Name Middle Name Student ID

COTC Email Phone Number Landline Mobile

Street Address: _____

City: _____ State: _____ Zip: _____

Check here if you would like to change your permanent address on file to the address shown above.

I request that my certificate specifically state my name as:

First and Middle name must be the same or a close variation of the file name. Ex: Mike or Michael, middle name or initial etc. Last name must match.

First: _____ Middle: _____ Last: _____

I will complete my certificate during: Spring (May) Summer (August) Autumn (December) _____ (year)

I am requesting a certificate in:		
<input type="checkbox"/> Addiction Studies	<input type="checkbox"/> Computer Aided Drafting – Architectural	<input type="checkbox"/> Peace Officer Basic Training
<input type="checkbox"/> Basic Baking and Pastry Skills	<input type="checkbox"/> Computer Aided Drafting – Civil	<input type="checkbox"/> Phlebotomy
<input type="checkbox"/> Basic Culinary Skills	<input type="checkbox"/> Electrocardiography	<input type="checkbox"/> State Tested Nurses Aid (STNA)
<input type="checkbox"/> Bookkeeping Skills	<input type="checkbox"/> Emergency Medical Services – Advanced	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Case Management for Healthcare/Geron	<input type="checkbox"/> Emergency Medical Services - Basic	
<input type="checkbox"/> Community Health Worker	<input type="checkbox"/> Home Healthcare Provider	

Student Signature Date

Advisor Signature Date

Gateway Use Only: CRI code RGCCERTP added with status "Not Reviewed" <input type="checkbox"/>	
File approved by Student Records <input type="checkbox"/> Yes <input type="checkbox"/> No	Student notified <input type="checkbox"/> Yes <input type="checkbox"/> No
Processed by: _____	Date: _____