Department of Computer Science
GRADUATE CERTIFICATE IN CYBERSECURITY ENROLLMENT FORM

Name: ____________________________________________________________

ODU UIN: ______________ Email: ________________________________

Mailing Address: _________________________________________________

City/State/Zip or Postal Code: ________________________________

A minimum of a Bachelor’s degree in a computer science related field with a 3.0 GPA is required for admittance into the certificate program. Please submit either a copy of your diploma or a copy your transcripts that show the degree conveyed.

Degree: ___________________________________ Year: ______________

University: ______________________________________________________

Major: ___________________________________ GPA: ______________

If you hold one or more other degrees, please list those degrees here. Provide the field/area/major of each degree and the name of the college or university.

____________________________________________________________________________________

____________________________________________________________________________________

Relevant Work Experience

Organization: ___________________________________ Number of Years: ______________

Job Title: ____________________________________________________________

Please return your completed enrollment form by email to mweigle@odu.edu, or by postal mail to Dr. Michele Weigle, Department of Computer Science, Old Dominion University, Engineering & Computational Sciences Building, 4700 Elkhorn Ave, Suite 3300, Norfolk, VA 23529-0162.

Enrollment approved by: ___________________________ Date: ______________

Last Updated: September 2016