



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: _____