

SCHOOL OF CRIMINAL JUSTICE, FIRE SCIENCE & EMS  
DEGREE AUDIT

**CORRECTIONS OFFICERS CERTIFICATE PROGRAM**

Name \_\_\_\_\_ Student ID \_\_\_\_\_

Date \_\_\_\_\_ Month/Yr. Grad. \_\_\_\_\_

School Chair Approval \_\_\_\_\_ Advisor \_\_\_\_\_

Course Name	Course Number	Semester Taken	Grade in Course
CJUS110	Intro. to Corrections		
CJUS130	Client Relations in Corrections		
CJUS140	Correctional Client Growth & Development		
CJUS220	Institutional Corrections		
CJUS250	Correctional Law		

I certify that a grade of "C" or better has been attained for each course for a total of 15 credits.

\_\_\_\_\_ College Dean

\_\_\_\_\_ Date