Advanced (Graduate) Certificate in Geographic Information Science
Approval Form
SED Program #22584

SECTION A:
Name (Last, First, MI):__________________________  UB Person #:______________________
Home Department:______________________________
Name of your advisor: ________________________________
Name, dept. affiliation of your extra-departmental PhD Committee Member:______________________

SECTION B:
GI Science Core Courses: Course#  Semester  Grade
Introduction to GI Sci
Geospatial Ontology
Database Systems or Designing Database Design for GI Systems
Graduate Research Ethics

SECTION C:
Elective Related to GI Science and Approved by Advisor:
Course Title:__________________________________________  Semester  Grade

Proof of GI Systems Proficiency:

Dissertation Topic:____________________________________

Completed an Internship*?  Yes __ No
Completed an International Experience*?  Yes __ No

Signatures
Student: ____________________________ Date: ________
Advisor: ____________________________ Date: ________
IGERT in GI Sci Program Director: _________________ Date: ________

Graduate School Approval:

* recommended but not required