



Office of the Registrar  
160 Herrick Road, Newton Centre, MA 02459  
617-559-8642 (phone) 617-559-8825 (fax)

**PETITION TO ADD CERTIFICATE TO MASTERS DEGREE PROGRAM**

Date: \_\_\_\_\_ Student ID # \_\_\_\_\_

Name (Last, First, MI) \_\_\_\_\_

- Current Degree Program:
- Masters of Arts in Jewish Studies
  - Masters of Jewish Liberal Studies
  - Masters of Jewish Education
  - Masters of Jewish Education/Jewish Studies

**Certificate I would like to pursue in addition to Master's degree above:**

- Certificate in Early Childhood Jewish Education
- Certificate in Interfaith Families Jewish Engagement
- Certificate in Jewish Experiential Education
- Certificate in Jewish Special Education
- Certificate in Jewish Sacred Music
- Certificate in Jewish Music Education

Student's Signature \_\_\_\_\_

Advisor's name: \_\_\_\_\_

Advisor's Signature \_\_\_\_\_

Date: \_\_\_\_\_

**Return this form to the Office of Admissions**

.....  
Office Use only:

**Form given to Department for approval:** \_\_\_\_\_

Approved by \_\_\_\_\_

Approval Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Return this form to the Registrar's Office.**

Date Received by Registrar \_\_\_\_\_ Date Entered \_\_\_\_\_

Effective Date of Change: Year \_\_\_\_\_ Term \_\_\_\_\_