



DEPARTMENT OF

City & Metropolitan Planning

COLLEGE OF ARCHITECTURE + PLANNING | THE UNIVERSITY OF UTAH

Graduate Certificate in Planning

Name: _____

U of U ID: _____

Contact Info

Address: _____

E-mail: _____

Phone: _____

Admission

Date of Committee Approval: _____

Undergraduate Institution: _____

Degree / Major / Date: _____

Completion Requirements

Requirements are satisfied by completing the minimum credit hours needed in each part, including courses cross-listed with ARCH or REDEV, or others approved by the Department.

[If substitutions are made, graduate advisor must initial the course on this form]

1. Foundational Knowledge _____
(one course from 6100, 6200, 6240, 6260)

2. Practical Skills _____
(one course from 6010, 6020, 6030, 6040, 6430, 6450, 6460, 7210, GEOG 6140, LAW 7010)

3. Substantive Area Electives _____
(minimum 9 additional credits – see program announcement for suggested courses)

Completion

Date Registrar notified of completion: _____