



HUMAN RESOURCES

Tammy Jalique
Associate Superintendent for Human Resources
1875 W. Lowell Avenue
Tracy, CA 95376
Phone 209.830.3260 Fax 209.830.3264

CERTIFICATION OF COURSE COMPLETION

Section to be completed by the College/University

This is to certify that _____ has successfully
Employee/Student Name
completed all course requirements for _____
Course Title/Course Number
from _____. The course completion
College/University
date was _____.
Date

This qualifies the student for the following number of units.

Please be sure to indicate Semester/Quarter units and Upper/Lower division coursework by checking the correct selection below

Total Number of Units

☐ Semester ☐ Quarter
Units (Check One)

☐ Upper ☐ Lower
Division (Check One)

Instructor/Registrar/Dean Print

Signature

Title

Date

Section to be completed by Tracy Unified School District Employee

I understand that this Certification of completion form must be submitted to the Human Resources Department by September 1st, to receive credit for the units for the current school year, and an Official Transcript must be received by the Human Resources Department prior to November 1st.

Employee Signature

Date