



## Application for Advanced Skill Set Certificates

*\*Please complete all information requested.\**

### Student Information

**Full Name:** \_\_\_\_\_ **Student ID #:** \_\_\_\_\_  
(Print full name as you wish it to appear on your skill set certificate)

**Mailing Address** \_\_\_\_\_  
Street City State ZIP  
(This is the address where your certificate will be mailed)

**Telephone Number:** ( ) \_\_\_\_\_

**Demographic Information** (This information is used to assist in the completion of demographic statistics about New River certificate completion rates)

**Sex:**  Male  Female  
**Race:**  African American  Caucasian (White)  Other  
 Native American  Hispanic

### Advanced Skill Set Information

**Campus:**  Beckley Campus  Greenbrier Valley Campus  
 Mercer County Campus  Nicholas County Campus

**Name of Skill Set:** \_\_\_\_\_

**Please attach a copy of your skill set evaluation sheet to this application. Students applying for the Phlebotomy Technician skill set certificate must also send a copy of their National Phlebotomy Certificate with the application.**

**I understand that completing an Advanced Skill Set Certificate does not make me eligible to participate in the graduation ceremony.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Advisor Signature

Please return completed application to the Registrar's Office Attn: Tonya Webb 280 University Drive, Beaver, WV 25813 or email [twebb@newriver.edu](mailto:twebb@newriver.edu). If you have any questions please call (304) 929-6722 or email at [twebb@newriver.edu](mailto:twebb@newriver.edu).