



CERTIFICATE OF ENROLLMENT/ATTENDANCE

Student: First Name	Last Name
EmailAddress	
Illinois Tech ID Number	Field of study at Illinois Tech:
Type of program: <input type="radio"/> One year master's degree program	
Date(s) of enrollment (Check one of the following): <input type="radio"/> Start Date (MM/DD/YYYY) of the ofofTc 13 Tc 1692 ()-22 (57it(at	