

**Certificate of Proficiency  
OFFICE ASSISTANT  
MiraCosta College  
Effective Fall 2008 through Summer 2009**

**(Office Use Only)**

<b>Catalog Number</b>	<b>Course Name</b>	<b>Units</b>
BOT 100	Beginning Keyboarding <b>OR</b> Typing Test @ 40 wpm	(1) _____
BOT 110	Word Processing	3 _____
BOT 113	Basic Office Skills	1 _____
<b>Select at least four elective units from the following:</b>		4 _____
BOT 102	10-Key	(1) _____
BOT 111	Machine Transcription	(1) _____
BOT 112	Machine Calculation	(1) _____
BOT 117	Management Office Skills	(1) _____
BOT 299	Cooperative Work Experience – Occupational	(1) _____
BUS 137	Customer Service	(3) _____
BUS 292	Internship Studies	(1) _____
<b>TOTAL UNITS .....</b>		<b>8 - 9</b> _____

**Requirement: Grade of "C" or better in each course.**

<b>OFFICE USE ONLY</b>	Date/Initials
Preliminary Letter OK_____ Not OK_____	
Final Letter OK_____ Not OK_____	
Certificate Mailed	



MIRACOSTA COLLEGE
Student Application
CERTIFICATE OF PROFICIENCY

Name \_\_\_\_\_ Gender (circle one): M F
Print name exactly as it is to appear on certificate. (First, Middle, Last - use upper and lower case)

Student ID Number \_\_\_\_\_ SSN \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Telephone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Student Address to Mail Certificate:
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

Please return completed form to Daria Davis at the Instructional Services Office on the Oceanside Campus - Bldg. 4700 (M/S 8A) or by mail at MiraCosta College...One Barnard Drive...Oceanside, CA ...92056

Certificate for which you are applying: \_\_\_\_\_ # of Units: \_\_\_\_\_
(See college catalog for exact titles)

Have you already completed your certificate? (Yes/No) \_\_\_\_\_

If Yes, Semester of Completion (i.e., Spring 2008) \_\_\_\_\_

If No, Anticipated Semester of Completion (i.e., Spring 2009) Fall [ ] 20\_\_ Spring [ ] 20\_\_ Summer [ ] 20\_\_

Do you have any Substitution/Waiver form(s) on file at MiraCosta that include courses needed for this certificate? (Yes/No) \_\_\_\_\_

If yes, please note that the Substitution/Waiver form(s) must be attached to and turned in with this application

List any/all colleges other than MiraCosta from which you have taken courses to be considered for this certificate:
\_\_\_\_\_

Are transcripts for the above named college(s) on file at MiraCosta College? (Yes/No) \_\_\_\_\_

Please note that official transcripts from the above-named college(s) must be on file at MiraCosta College or attached to and turned in with this application.

READ CAREFULLY BEFORE SIGNING

Note: If official transcripts from other colleges and/or course Substitution/Waiver forms are NOT on file at MiraCosta, or if you have courses in progress at another college that are required to complete this Certificate, these documents must be on file at MiraCosta College or attached to and turned in with this application before a Certificate will be awarded. Applications should be returned to the Instructional Services office, Building 4700 on the Oceanside Campus, or mailed to the following address:

Daria Davis
MiraCosta College
One Barnard Drive
Oceanside, CA 92056

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

FOR OFFICE USE ONLY

[ ] Transcript(s) Attached [ ] Substitution Waivers (s) Attached [ ] Certificate Courses Confirmed by (initials): \_\_\_\_\_