



Graduate Certificate in Migration Studies – Advisor’s Approval Form

Applicants should complete this form and collect a signature from their advisor or graduate program director

Student’s name: _____ Student # _____

Advisor’s name: _____

As advisor of this student, I am aware of their application to the Graduate Certificate in Migration Studies.

I understand that the requirements of the certificate program are as listed on the [Centre for Migration Studies Graduate Certificate webpage](#) and detailed on the [UBC Academic Calendar](#).

Advisor’s signature Date

Advisor’s name & title

OR

Graduate Program Director’s signature Date

Graduate Program Director’s name