

**Fullerton College**  
**Kinesiology, Wellness and Dance Division**  
**Certificate Program Application**



Please complete all information fields and print legibly.

Date of Application \_\_\_\_\_ Term Completed \_\_\_\_\_ Student ID# \_\_\_\_\_

Name \_\_\_\_\_  
(Please **print your name** the way you want it to appear on the certificate)

Address (Include Apt/Unit#) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cell Phone \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Check certificate(s) that apply:

- |   |  |
|---|--|
| <input type="checkbox"/> Personal Trainer           | <input type="checkbox"/> Pilates             |
| <input type="checkbox"/> Athletic Coach             | <input type="checkbox"/> Yoga Teacher Skills |
| <input type="checkbox"/> Dance Teaching Certificate |  |

Directions:

- Make an appointment with the **Program Coordinator**.
- Program Coordinator will require a copy of your Unofficial transcripts.
- Proof of current CPR card, if applicable.
- **Program Coordinator for Personal Trainer** is Sean Sheil, ssheil@fullcoll.edu, 714.992.7493
- **Program Coordinator for Athletic Coach, Pilates, and Yoga Teacher Skills Certificate** is Yolanda Duron, yduron@fullcoll.edu, 714.992.7470.
- **Program Coordinator for Dance Teaching Certificate** is Melanie Rosa, mrosa@fullcoll.edu, 714.992.7485.

Once reviewed and approved by the program coordinator, this form will be submitted to the KWD division office for processing. After the President has approved and signed the certificate, the certificate will be mailed to you.

**Allow Four (4) to Six (6) weeks for the processing of your certificate.**

\_\_\_\_\_  
Certificate/Program Coordinator

\_\_\_\_\_  
Date