

**COMPLETION OF  
THE BERKELEY CERTIFICATE IN DESIGN INNOVATION**

Name (Last, First): \_\_\_\_\_

SID: \_\_\_\_\_

Major(s): \_\_\_\_\_

Minor(s): \_\_\_\_\_

Degree Date (Semester/Year): \_\_\_\_\_

Berkeley email: \_\_\_\_\_

Permanent email: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Permanent Phone #: \_\_\_\_\_

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

Date: \_\_\_\_\_

Please fill in course number used to complete each requirement, as well as the semester and year taken:

	Course	Semester/ Year	Grade	Reason for Selecting
Design Foundation				
Design Skills I				
Design Skills 2				
Advanced Design				

After completing the form, please attach your transcript and save the file as “Last Name\_First Name\_Completion). Submit this pdf to your major adviser. If you are completing more than one major, please submit one form to each of your advisers.

Major Advisers: Please see next page.

To be completed by Major Adviser:

Please review the courses listed above to ensure that this student has taken a design foundation course that is not offered in your College or School and has not taken more than one course that duplicates a major requirement.

- Design Foundation course is not offered in your College or School.
- No more than one course has been used to fulfill this student's major requirement. The course, if any, that overlaps with the major is: \_\_\_\_\_

Thank you for helping to review any duplication with the student's major. Please sign below and send to [bcdi\\_completion@berkeley.edu](mailto:bcdi_completion@berkeley.edu)

\_\_\_\_\_  
Major Adviser's Signature                      Printed Name                      Date

\_\_\_\_\_  
email

\_\_\_\_\_  
For BCDI Academic Committee:

This student has completed the courses for the BCDI certificate at the end of (term/year): \_\_\_\_\_

Student meets minimum GPA in BCDI courses. GPA is: \_\_\_\_\_

BCDI Faculty Approval and Date: \_\_\_\_\_