



**Continuing Education**  
1717 S. Chestnut Ave.  
Fresno, CA 93702-4709  
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[prof.dev@fresno.edu](mailto:prof.dev@fresno.edu)  
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# Application for Continuing Education Certificate

Select one:

- Classroom Technology Integration
- Coaching for Excellence
- Digital Innovator
- Restorative Strategies for the Classroom
- STEM Teaching
- Technology Skills for Educators

Student ID# \_\_\_\_\_  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone# \_\_\_\_\_ Email \_\_\_\_\_

List courses completed:

Course #:	Course Name:	Date Completed:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Upon confirmation of satisfactory completion of the above courses, you will receive a certificate and it will be posted to your transcript.

**Return completed form via postal mail, email, or fax:**

Fresno Pacific University  
Continuing Education - Box 2009  
1717 S. Chestnut Ave., Fresno, CA 93702  
Email: [peggi.kriegbaum@fresno.edu](mailto:peggi.kriegbaum@fresno.edu)  
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