

**ROCKLAND GRADUATE
CAMPUS**



Advanced Certificate in Gerontology

Name _____ EMPL ID _____

Address _____

Phone Number _____ Email Address _____

Required Courses (15 credits)

Course		Semester	Grade
HAD 602	Human Resource Administration in Health Care		
HAD 603	Fundamentals of Budgets & Finance in Health Administration		
HAD 709	Legal Aspects in Health Administration		
HAD 710	Gerontology Processes of Aging		
HAD 711	Long Term Care Administration		

Student signature: _____ **Date** _____

Advisor signature: _____ **Date** _____