## **Degree Confirmation**

If you have not obtained a baccalaureate degree prior to entering the clinical year, you *must* request the Registrar of your University/College to submit a written confirmation (see below) to the MLS program that you will be eligible to receive a degree upon successful completion of the clinical education coursework.

	SSN/Student ID#:
Address:	Phone:
University/College:	
Required Courses in Progress Semester Year	Required Courses Planned Semester Year
To be completed by the University/Colleg	
This certifies that	will be eligible to
receive a Baccalaureate Degree from	upon
	University/College
successful completion of the required cou	University/College arses (as identified above) and the clinical
successful completion of the required cou education coursework at the Mercy Hospi	University/College arses (as identified above) and the clinical
successful completion of the required couleducation coursework at the Mercy Hospi Science program in St. Louis, Missouri.  Signature of Registrar  Please email the completed form (in PDF or mail to:	University/College  arses (as identified above) and the clinical ital St. Louis School of Medical Laboratory  Date  format) to Michelle.Fahs@mercy.net
successful completion of the required couleducation coursework at the Mercy Hospis Science program in St. Louis, Missouri.  Signature of Registrar  Please email the completed form (in PDF or mail to:  Mercy Hospital St. Louis – MAIN La School of Clinical Laboratory Science Attn: Michelle Fahs	University/College  arses (as identified above) and the clinical ital St. Louis School of Medical Laboratory  Date  format) to Michelle.Fahs@mercy.net  AB
Successful completion of the required coureducation coursework at the Mercy Hospis Science program in St. Louis, Missouri.  Signature of Registrar  Please email the completed form (in PDF or mail to:  Mercy Hospital St. Louis – MAIN La School of Clinical Laboratory Science	University/College  arses (as identified above) and the clinical ital St. Louis School of Medical Laboratory  Date  format) to Michelle.Fahs@mercy.net  AB