

Microcredential Proposal

Name of Proposed Microcredential

Sponsoring Unit/Discipline/Program

Your name

Title

Email

Phone

Please attach any documentation on additional pages.

1. Please briefly describe what the microcredential covers. Where does it fit in into a sequence of credentials?

2. Please describe the need for this microcredential. How will it contribute to student success?

3. Which external organizations (e.g. employers, transfer institutions) will recognize this microcredential?

4. Please attach a list of participants in the microcredential development process and their titles/organizations.
(Add pages as needed.)

Name	Title	Organization

5. Who will benefit from this microcredential? Who is the target audience?

6. Please list the competencies required for the microcredential. (Typically there will be 5-7 competencies. See resource list for help on how to write competency statements.)

Microcredential recipients are able to ...	
1.	
2.	
3.	
4.	
5.	
6.	
7.	

7. How will you assess if a student has achieved the competencies? Indicate what percentage of competencies must be achieved in order for a student to be awarded a microcredential. Attach any documentation on additional pages.

8. What will be the award process in your unit/discipline/program? Who will be responsible for which activities? (Consider how you will market the microcredential; how students will apply; how applications will be processed and reviewed; where applications will be stored; how results will be communicated to students; and the timeline for applications and awards.)

9. Who will be the contact person in your unit/discipline/program for processing the microcredential?

Name	Phone	Email
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Approvals

Chair/Coordinator Unit/Program/Discipline (Print name)	Signature	Date
Vice President or Designee (Print name)	Signature	Date
Microcredential Committee Representative (Print name)	Signature	Date
Vice President WDCE or Designee (Print Name)	Signature	Date