If you are currently thinking about developing a new credit certificate, you must first complete this form.

This form asks for information on the impact of the proposed credit certificate on a variety of aspects, including relation to mission, technology, resources and space. This information is required before a decision can be made about the College’s ability to support the certificate.

Eight broad criteria are considered in the decision to proceed:

1. Certificate format
2. Certificate description, purposes and planning
3. Admission requirements
4. Academic and other support services
5. Certificate assessment and improvement
6. Sample certificate schedule and curriculum
7. Faculty
8. Identifying financial resources, instructional facilities

|  |
| --- |
| **1. Certificate Format** |

1. **Format(s):** [ ] Day [ ] Evening/Weekend
*Please check all that apply*
2. **Modes:** [ ] Standard [ ] Accelerated [ ] Online
**Note:** *If the certificate is designed to enable students to complete 50% or more of the course requirements through online education, please read the information found at the SUNY link to Distance Learning Out-of-State Authority:* [*http://www.system.suny.edu/academic-affairs/distance-learning/*](http://www.system.suny.edu/academic-affairs/distance-learning/) *and discuss your proposal further with Tamara Cupples, Executive Director of Online Learning:* *tamara\_cupples@fitnyc.edu/212-217-4070**.*

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|  **2. Certificate description, purposes and planning** |

* What is the description of the certificate program?
* What are the certificate’s education and, if appropriate, career objectives, and the certificate’s primary student learning outcomes (SLOs)? *NOTE: SLOs are defined by the Middle States Commission on Higher Education in the Characteristics of Excellence in Higher Education as “clearly articulated written statements, expressed in observable terms, of key learning outcomes: the knowledge, skills and competencies that students are expected to exhibit upon completion of the certificate.”*
* How does the certificate relate to FIT’s and SUNY’s mission and strategic goals and priorities?
* What is the certificate’s importance to the institution, and its relationship to existing and/or projected certificates and its expected impact on them? *(When writing your statement, please consider non-credit courses and programs as well).*
* As applicable how does the certificate reflect diversity and/or international perspectives
* How were faculty involved in the certificate’s design, and describe input by external partners, if any (e.g., employers and institutions offering further education?
* How did input, if any, from external partners (e.g., educational institutions and employers) or standards influence the certificate’s design?
* Outline all curricular requirements for the proposed certificate, including prerequisite, core, specialization (track, concentration), internships, and any other relevant component requirements.
* Certificate Impact on SUNY and New York State
	1. Need: What is the need for the proposed certificate in terms of the clientele it will serve and the educational and/or economic needs of the area and New York State? How was need determined? Why are similar certificates, if any, not meeting the need?
	2. Employment: For certificate programs designed to prepare and enhance employment abilities, use the table below to list potential employers that have requested establishment of the certificate and state their specific number of positions needed. If letters from employers support the certificate, they may be **appended** at the end of this form. ***(Add additional rows as needed).***

|  |  |
| --- | --- |
| **Employer** | ***Need: Projected Positions*** |
| **In initial year** | **In fifth year** |
|  |  |  |
|  |  |  |
|  |  |  |

* 1. ***Similar Certificate Programs:*** Use the table below to list similar certificates at other institutions, public and independent, in the service area, region and state, as appropriate. ***(Add additional rows as needed).***

|  |  |  |  |
| --- | --- | --- | --- |
| **Institution** | **Certificate Title** | **Degree** | **Enrollment** |
|  |  |  |  |
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* 1. ***Collaboration:*** Did this certificate’s design benefit from consultation with other SUNY campuses? If so, what was the result of that consultation?

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| **3. Admissions** |

* What are all admission requirements for students in this certificate? Please note how they differ from FIT’s minimum admissions requirements and explain why they differ (See: <http://www.fitnyc.edu/admissions/apply/eligibility.php>)
* What is the process for evaluating exceptions to those requirements?
* How will FIT encourage enrollment in this certificate by persons from groups historically underrepresented in the discipline or occupation?

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| **4. Academic and Other Support Services** |

* Summarize the academic advising and support services available to help students succeed in the proposed credit certificate program.

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| **5. Certificate Assessment and Improvement** |

* Explain plans for assessing achievement of students’ learning outcomes during the proposed certificate and success after completion.
* Please upload or attach a plan or curriculum map showing the courses in which the certificate’s educational and, if appropriate, career objectives will be taught and assessed. NOTE: *The University Faculty* Senate’s Guide for the Evaluation of Undergraduate Programs is a helpful reference and can be downloaded here: <http://system.suny.edu/media/suny/content-assets/documents/academic-affairs/assessment/GuideForTheEvaluationOfUndergraduatePrograms_FINAL-ONLINE.pdf>

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| **6. FIT/SUNY Program Schedule for Certificate and Advanced Certificate Programs** |

**Certificate Program/Track Title and Award: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

* Indicate **academic calendar type**: [ ] Semester [ ] Quarter [ ] Trimester [ ] Other (describe):
* Label each term in sequence, consistent with the institution’s academic calendar (e.g., Fall 1, Spring 1, Fall 2)
* Use the table to show **how a typical student may progress through the certificate**; copy/expand the table as needed. **Complete all columns that apply to a course.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Term 1:**  |  |  | **Term 2:** |  |
| **Course Number & Title** | **Credits** | **New (X)** | **Co/Prerequisites** |  | **Course Number & Title** | **Credits** | **New (x)** | **Co/Prerequisites** |
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| **Term credit totals:** |  |  | **Term credit totals:** |  |  |
| **Term 3:**  |  |  | **Term 4:**  |  |
| **Course Number & Title** | **Credits** | **New (X)**  | **Co/Prerequisites** |  | **Course Number & Title** | **Credits** | **New (X)** | **Co/Prerequisites** |
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| **Term credit totals:** |  |  | **Term credit totals:** |  |  |

|  |  |
| --- | --- |
| **Program Totals (in credits):** | **TotalCredits:**  |

|  |
| --- |
| **7. Faculty** |

1. Complete the SUNY Faculty Table to describe current faculty and to-be-hired (TBH) faculty.

**SUNY Faculty Table**Provide information on current and prospective faculty members (identifying those at off-campus locations) who will be expected to teach any course in the certificate program. Expand the table as needed. Use a separate Faculty Table for each institution if the certificate program is a multi-institution certificate program.

| **(a)** | **(b)** | **(c)** | **(d)** | **(e)** | **(f)** |
| --- | --- | --- | --- | --- | --- |
| **Faculty Member Name and Title/Rank****(Include and identify Certificate Director with an asterisk)** | **% of Time Dedicated to This Certificate** | **Certificate Courses Which May Be Taught****(Number and Title)** | **Highest and Other Applicable Earned Degrees (include College or University)** | **Discipline(s) of Highest and Other Applicable Earned Degrees** | **Additional Qualifications: List related certifications, licenses and professional experience in field** |
| **PART 1. Full-Time Faculty** |  |  |  |  |  |
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| **Part 2. Part-Time Faculty** |  |  |  |  |  |
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| **Part 3. Faculty To-Be-Hired (List as TBH1, TBH2, etc., and provide title/rank and expected hiring date)** |  |  |  |  |  |
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| **8. Identifying Financial Resources, Instructional Facilities, and Revenue/Direct and Indirect Costs for your Proposed Credit Certificate Program** |

Anticipated Enrollment for part-time credit, certificates:

* Enter anticipated enrollment numbers in the table below.

|  |  |
| --- | --- |
| **Fiscal Year** | **Semester** |
| **Part-time enrollment** | **Total**  |
| Year 1 | Fall  **1** |  |  |
| Spring **2** |  |  |
| Year 2 | Fall  **3** |  |  |
| Spring  **4** |  |  |
| Year 3 | Fall **5** |  |  |
| Spring **6** |  |  |
| Year 4 | Fall **7** |  |  |
| Spring **8** |  |  |
| Year 5 | Fall **9** |  |  |
| Spring **10** |  |  |
| Year 6 | Fall **11** |  |  |
| Spring **12** |  |  |

* Please state how the above enrollment was determined, and what assumptions were used:

**Projecting Operating Costs**

Narrative Description.

For the following four sections, write brief narratives. Please consult with your dean and identify the costs of the proposed activities.

1. Faculty, technologists, and other staff support:
	* Identify the expertise of existing faculty, technologist and other staff available in the department to offer the proposed certificate.
	* Describe the areas or activities for which new faculty, technologists, or other staff will need to be hired.
	* Include new course development start-up costs, and instruction and coordination after the certificate is implemented.
2. Library
	* Please consult with the Director of the Library about the library resources needed for the proposed certificate.
	* Are current holdings and levels of acquisition adequate to support the new activity?
	* If not, what levels of acquisition will be required and over what time period?
3. Space
Identify the types of spaces required. Consider the need for classrooms, labs, studios, faculty offices and the departmental office. When doable, describe possibilities for sharing instructional space with other campus units.
4. Furniture, fixtures, equipment, information technology and software applications.
Please list and describe the items needed prior to the start of instruction and additional items, if any, that will be needed sometime during the first five years.
5. Please complete the below table to the best of your knowledge.

**Revenue Table (1) for proposed part-time, credit certificates**

|  |  |  |  |
| --- | --- | --- | --- |
| REVENUE | Planning year(s) & Start-up | When the certificate begins | After 5 years  |
| ***Multiply the projected number of enrolled students, per semester, by the tuition indicated in the left column*** |
| Estimated Number of students *(enter in each column to the right):* | $ | $ | $ |
| Lower Division Revenue: $ 435.00***per credit*** | $ | $ | $ |
| Upper Division Revenue $550.00***per credit*** | $ | $ | $ |
| Graduate Division Revenue $700.00***per credit*** | $ | $ | $ |
| Any other fees | $ | $ | $ |
| **TOTAL** | $ | $ | $ |

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| --- |
| **Approvals and Signatures** |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print name:

*Signature of Faculty preparer date*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print name

*Signature of Department Chair date*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print name*

 *Signature of School Dean date*

*Reviewed and discussed with concerned members of the Cabinet on (date)*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Signature of Vice President for Academic Affairs date*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*President’s Signature date*

**Marketing and Recruitment**

*If the President gives approval to proceed, the VP for Communications and External Relations will initiate discussion of the Marketing Questionnaire with the dean and the lead person for the proposed certificate. The Marketing Questionnaire is included in this packet for information; it does not need to be completed prior to approval to proceed. In addition, the VP for Enrollment Management & Student Success will also be consulted, as needed, regarding recruitment needs and impacts on enrollment and admissions.*

**Marketing Questionnaire**

Following completion of this document and the President’s approval to proceed, the Division of Communications and External Relations (x74700) will discuss this questionnaire with the dean and the lead person preparing the proposed certificate.

|  |  |  |  |
| --- | --- | --- | --- |
| Credit Certificate Name: |  |  |  |
| Is this a new certificate? |  |   If yes, when will the first class be admitted? |  |

Audiences

Please rank the following audiences in order of priority marketing:

|  |  |  |
| --- | --- | --- |
|  |  | High school students |
|  |  | Parents or other influencers |
|  |  | Guidance counselors or high school teachers |
|  |  | Adults |
|  |  | Transfer students (indicate what schools/majors they come from) |
|  |  |  |
|  |  |  |
|  |  | Current FIT students (indicate priority majors): |
|  |  |  |
|  |  |  |
|  |  | FIT alumni (indicate priority majors): |
|  |  |  |
|  |  |  |
|  |  | College graduates (other institutions) Please list potential feeder schools: |
|  |  |  |
|  |  |  |

Industry Information

Companies: Please provide the top 3-5 (or more) companies that would be interested in knowing about this certificate

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Trade associations: Please provide the top 3-5 (or more) trade organizations that would be interested in knowing about this certificate

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Publications: Please provide the top 3-5 (or more) publications that are relevant to this career field

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Websites: Please provide the top 3-5 (or more) websites that are relevant to this career field

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Profile

Describe in a sentence the type of student you seek to admit. Describe their age, prior education if any, etc. What would be their academic strengths or primary areas of interest? It may help to think of this sentence:

This is a \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ certificate designed for a \_\_\_\_\_\_\_\_\_\_\_\_\_ student interested in \_\_\_\_\_\_\_\_\_\_\_\_ who seeks to accomplish \_\_\_\_\_\_\_\_\_\_\_\_\_.

Sample statements

*This certificate is a one-of-a-kind credit certificate program designed for urban, media-savvy professionals who have already attended college and who are interested in cutting-edge technology and who seek to learn new skills.*

*This certificate is an interdisciplinary program designed for cerebral, intellectual, incoming, traditional students interested in research and development who seek to work for technology companies.*

Competition

Are there competitor certificates? They need not be the exact certificates, but if they have a similar focus and appeal to a prospective student, consider including them. Also, list points of distinction: i.e., if they are offered fully online but FIT’s is not (or vice versa) or what degree they offer; if they are public or private, full-time and/or part-time, have flexible scheduling, etc.

|  |  |  |
| --- | --- | --- |
| Certificate name: |  |  |
| Credit or non-credit: |  |  |
| Institution: |  |  |
| Points of distinction: |  |  |
|  |  |  |
| Certificate name: |  |  |
| Credit or non-credit: |  |  |
| Institution: |  |  |
| Points of distinction: |  |  |

Anything Else?

Please provide any other information that would help define marketing goals, such as why students would seek out this certificate specifically.

If this is a new mode of delivery of an existing certificate (i.e., current certificate now being offered as evening/weekend, online, one-year, etc.) please provide information about the current profile of students in the certificate—where do they come from? What prior educational experience (names of schools, types of degrees/majors); companies they have worked for; where they come from (city, state, or another country, etc.)?

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