PROPOSING A MICROCREDENTIAL

Name(s) of individual(s) submitting proposal:

NAME (print)**:** _____   Signature: _____

NAME (print)**:** _____   Signature: _____

NAME (print)**:** _____   Signature: _____

LEVEL: ❏ Undergraduate   ❏ Graduate   ❏ Mixed level

SCHOOL/COLLEGE: ❏ Business   ❏ Fine & Performing Arts   ❏ Science & Engineering
                                  ❏ Education   ❏ Liberal Arts & Sciences   ❏ Interdisciplinary
                                  ❏ Other (e.g., Student Affairs) – please specify: _____

DEPARTMENT(S)/PROGRAM(S):   _____

TO PROPOSE A MICROCREDENTIAL, **respond below or attach a narrative addressing the following items.**

<u>**PART I: NAME & TYPE OF MICROCREDENTIAL**</u>
- **NAME of microcredential:** _____

- **DESCRIBE** the proposed microcredential. **EXPLAIN** its value to New Paltz and how students, alumni and/or community members will benefit from it.

- **Check the items that apply:**
  ☐   This is a *curricular* microcredential
  If curricular, number of credits required for completion: _____
  ☐   Non-credit experiential learning activities are included.
  ☐   This is a non-credit bearing microcredential

- **Proposed start date:** _____

- **Financial Aid eligible?**   ☐ No   ☐ Yes, under these circumstances:

- **LIST the Student Learning Outcomes** ("Upon successful completion, students will know or be able to ....") for the proposed microcredential. _NOTE: These should be microcredential SLOs, not the SLOs of individual courses or of a larger degree program toward which the microcredential may stack._

PART II: TARGET AUDIENCE

- **PLEASE IDENTIFY THE TARGET AUDIENCE.** *(Check all that apply.)*

  ☐ Matriculated students   ☐ Graduate students   ☐ Post-baccalaureate students

  ☐ Non-matriculated students   ☐ Undergraduate students   ☐ Alumni/community members

  ☐ Prospective new students. Please describe the target demographic:

  Anticipated number of participants: _____

  Do you expect this number to change over time? If yes, please describe how.

PART III: CONTENT AND COURSEWORK

- **Please LIST THE COMPONENTS AND SEQUENCE of the coursework and/or experiences associated with this microcredential.** (As applicable, please include the individual and collective number of credit hours involved.)

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- **If coursework is involved, what is the LEVEL OF COURSEWORK?** *(Check all that apply.)*

  ☐ 100-level   ☐ 300-level   ☐ 500-level   ☐ 700-level

  ☐ 200-level   ☐ 400-level   ☐ 600-level

- **If this is *a curricular* microcredential, what is the PROPOSED COURSE MODALITY?** *(Check all that apply.)*

  ☐ Seated   ☐ Online   ☐ Hybrid

- **Does the micro credential include NEW OR REVISED COURSES**?   ☐ Yes   ☐ No

  If yes, please append them to this proposal, or submit them for review separately. All course additions or changes must be approved before the microcredential proposal can be considered.

- If the microcredential includes **NON-CREDIT EXPERIENTIAL LEARNING,** are programs already in place to offer this to students?

  ☐ **YES.** Please describe what already exists: _____

  ☐ **NO.** Please describe what needs to be created: _____

- **Non-credit experiential learning will be recorded on the [Co-Curricular Transcript](#).** Please indicate which of the following [Co-Curricular Transcript learning outcome(s)](#) apply. For each applicable learning outcome, please include the rubric(s) you will use to assess student learning.

  ☐ *Cognitive Skills*: Students will engage in informed debate, principled dissent, critical thinking/analysis, problem solving, and acceptance/appreciation of multiple perspectives.

  ☐ *Communication Skills*: Students will engage in activities that improve verbal, non-verbal, and listening skills. (May include marketing and promotion experience.)

  ☐ *Computer and Technology Skills*: Students will increase their information literacy through interaction with software, databases, audio/visual technology, and other technologies.

  ☐ *Cultural Knowledge*: Through engagement with culture(s) other than the student's own, the student will develop a deeper understanding of global communities and cultures.

  ☐ *Ethical Reasoning*: The student will make ethical decisions in the best interest of the group and greater community without trying to advance the student's own agenda.

  ☐ *Leadership Skills*: The student will improve her/his/their ability to lead, interact, represent, and inspire others, as well as the ability to delegate and provide critical feedback to members of a group.

  ☐ *Financial Management*: The student will improve her/his/their knowledge and experience with managing/ planning budgets and finances.

  ☐ *Reading and Writing Proficiency*: The student will improve her/his/their ability to (1) read and interpret literature/documents to acquire knowledge in a subject area and (2) write proficiently without spelling, grammar, or comprehension errors.

  ☐ *Social Responsibility*: The student will develop an awareness and commitment to social justice, civic engagement, personal responsibility and equitable treatment of others.

  ☐ *Teamwork*: Working with a group of people for an extended period, the student will demonstrate mature, respectful, professional and collaborative relationships with others and the ability to trust and be trusted for the common good of the team.

STACKABILITY: If the proposed microcredential is stackable toward another program or award (microcredential, certificate, minor, degree), describe the stacking plan, indicating how credits or experiential activities will apply.

WORKFORCE LINKAGES: Does this program have linkages to industry employers? If so, please describe:

PART IV: RESOURCES

What new resources (faculty/staff, budgetary, facility), if any, would be needed to support the proposed microcredential?

PART V: ASSESSMENT

Describe plans for evaluating the success of the microcredential and/or measuring the student learning outcomes identified in Part I (please note: SEIs alone do not constitute an assessment plan.)

RECOMMENDATIONS TO APPROVE *CURRICULAR MICROCREDENTIALS*:

By signing below, you confirm that consultation with departments/programs/divisions affected by this new micro-credential has taken place and that sufficient resources exist to support and sustain the program.

For Curricular Microcredentials of less than 9 credits*:

Dept. Chair(s)/Program Director(s):		Date:	
Dept. Chair(s)/Program Director(s):		Date:	
School/College Governance (if required):		Date:	
Academic Dean(s):		Date:	
Academic Dean(s):		Date:	
[Undergrad] Chair, Curriculum Committee:		Date:	
[Grad] Presiding Officer, Graduate Council:		Date:	
[Grad] Associate Provost, Academic Planning & Learning Innovation and Dean of Graduate, Professional & Interdisciplinary Studies		Date:	
Provost/Vice President for Academic Affairs (or designee):		Date:	

If the proposed microcredential includes non-credit experiential learning activities:

Vice President for Student Affairs:		Date:	

For Curricular Microcredentials of 9 credits or more*:

Dept. Chair(s)/Program Director(s):		Date:	
Dept. Chair(s)/Program Director(s):		Date:	
School/College Governance (if required):		Date:	
Academic Dean(s):		Date:	
Academic Dean(s):		Date:	
[Undergrad] Chair, Curriculum Committee:		Date:	
[Undergrad] Presiding Officer, Faculty Senate <u>OR</u> *[Grad]* Presiding Officer, Graduate Council:		Date:	
[Grad] Associate Provost, Academic Planning & Learning Innovation and Dean of Graduate, Professional & Interdisciplinary Studies		Date:	
Provost/Vice President for Academic Affairs (or designee):		Date:	

If the proposed microcredential includes non-credit experiential learning activities:

Vice President for Student Affairs:		Date:	

* <u>Mixed-level Curricular Microcredentials</u> (graduate/undergraduate) must be approved by the Curriculum Committee <u>and</u> the Graduate Council; *if 9 credits or more,* Faculty Senate must also approve the proposal.

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RECOMMENDATIONS TO APPROVE *COMPETENCY BADGES*:
By signing below, you confirm that consultation with departments/programs/divisions affected by this new micro-credential has taken place and that sufficient resources exist to support and sustain the program.

For Competency Badge proposals within the Division of Academic Affairs:

Dept. Chair(s)/Program Director(s):		Date:	
Dept. Chair(s)/Program Director(s):		Date:	
School/College Governance (if required):		Date:	
Academic Dean(s):		Date:	
Academic Dean(s):		Date:	
[Grad] Associate Provost, Academic Planning & Learning Innovation and Dean of Graduate, Professional & Interdisciplinary Studies		Date:	
Provost/Vice President for Academic Affairs (or designee):		Date:	

For Competency Badge proposals within the Division of Student Affairs:

Director:		Date:	
Vice President for Student Affairs:		Date:	

Course Recording:			
Records & Registration (signature):		Date entered:	
Co-Curricular Transcript (signature):		Date entered:	

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