Embedding Industry Credentials into Academic Coursework Project
Cohort 3: Institutional Attestation

Institution:	
Campus Project Lead (Name and Title):	
Phone:	**Email:**
President or Chief Academic Officer	
Phone:	**Email:**

☐	**Campus project lead will participate in CoP calls and will provide updates to SUNY Office of Academic Affairs on progress as requested.**
☐	**Campus Faculty Innovators will participate in training as determined by SUNY Office of Academic Affairs in consultation with Campus administrative lead.**
☐	**Campus CAO will ensure that all course sections with embedded credentials will be coded appropriately in Siris using Special Section Curricular Attribute (TT210) code 36, Embedded Industry Credential.**
President or Chief Academic Officer	**By checking the above checkboxes and signing below**, I hereby certify that the information contained within this proposal is, to the best of my knowledge, complete and accurate. I further certify, to the best of my knowledge, that any ensuing program and activity will be conducted in accordance with all applicable Federal and State laws and regulations, application guidelines and instructions, and that the requested budget amounts are necessary for implementation of this project. _____ _____ Signature Date _____ Name