

# MyCAA Education & Training Plan (ETP)

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Texas A&M International University  
Office of Continuing Education  
5201 University Boulevard | Laredo, TX 78041  
<https://tamiu.edu2.com/>

## Student Information:

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Student Name: Enter student name

School Issued Student ID: \_\_\_\_\_

Program Name: Business Management Professional Certificate Program with Externship

Program Type: Certificate

Program Duration: 6 Months

Scheduled Start Date: \_\_\_\_\_

Estimated Completion Date: \_\_\_\_\_

Course Delivery Format Online

## Program Overview:

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The Business Management Professional program provides students the basic competencies involved in a leading a team whether from the very top of a company, middle management or first-line supervision. Managers at intermediate levels serve as the bridge between their staff and higher management understanding how to execute the project, exercising good judgment over costs and risks but also able to extract and rely on the talent of their team to get things done effectively. Good leaders are key to cultivating positive morale among their staff while also best situated to identify policies or procedures that are not working and improve upon them to benefit both staff and management. Effective managers have unique skill sets that promote collaborative, orderly and productive work environments from which everyone can benefit.

## Certification/Licensure Eligibility upon Program Completion:

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Students should have or be pursuing a high school diploma or GED.

- There are no state approval and/or state requirements associated with this program.
- There is a National Certification exam available to students who successfully complete this program:
  - Microsoft Office Specialist (MOS) Certification Exam.

## Tuition Cost:

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\$3,999.00

**Course Breakdown:**

<b>Course/Program Code</b>	<b>Course/Program Title</b>	<b>Course Credits (if applicable)</b>
TAMIU-B-MGMT	Business Management Professional Certificate Program with Externship	375 Contact Hours/ 37.5 CEU's

**School Official Certification:**

By my signature below, I certify the above information is true, accurate, complete, and being submitted on behalf of the institution named in this document.

\_\_\_\_\_  
**Signature/Title of Authorized School Official**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**School Official Printed First and Last Name**

\_\_\_\_\_  
**School Official E-mail and Phone Number**