

# MyCAA Education & Training Plan (ETP)

---

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

## Student Information:

---

Student Name: \_\_\_\_\_

School Issued Student ID: N/A

Program Name: Six Sigma Black Belt (CSSBB) Certificate Program with Externship

Program Type: Certificate

Program Duration: 6 Months

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

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

Course Delivery Format Online

## Program Overview:

---

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 are several National Certification exams that are available to students who successfully complete this program:
  - American Society for Quality (ASQ) Certified Six Sigma Black Belt (CSSBB) Exam
  - o NOTE: Six Sigma Black Belt requires 2 completed projects with signed affidavits OR 1 completed project with signed affidavit and 3 years of work experience in one or more areas of the Six Sigma Body of Knowledge.
  - o Candidates do NOT need to be a Certified Six Sigma Green Belt.
    - Microsoft Office Specialist (MOS) Certification Exam.

## Certification/Licensure Eligibility upon Program Completion:

---

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:

---

\$3,799

**Course Breakdown:**

<b>Course/Program Code</b>	<b>Course/Program Title</b>	<b>Course Credits (if applicable)</b>
TAMIU-B-CSSBB	Six Sigma Black Belt (CSSBB) 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**