

## **Application for Industry Credentials**

name:		
Institution:		
Phone:	Email:	
Name of Industry Credentia	l:	
Check one of the following:		
☐Government Based	□Industry Based	□Product Based
Check one of the following	g:	
☐State Association	□ National Association	☐State Licensure
Check all that apply:  □ Product defines the indust	try □Can be earned a	at the secondary level
Classification of Instruction	onal Program (CIP) aligned	I to the industry credential:
Description of industry cre	edential:	
Website address for indus	stry credential (please link	to the credential, not a general page):
POS task number that alig competencies as aligned i	·	ntial. If not a POS, detail the student technical
Attach current Occupational credential is <b>necessary to c</b>		ng minutes that <b>verify in detail</b> the requested industry ance within an occupation.
Signature of Director		Date
All applications are due Nov	rember 30 for the following a	cademic year.