

# Digital Badge Proposal Form

## Non-Academic

Date of Submission: \_\_\_\_\_ Proposed Title of Badge: \_\_\_\_\_

<b>Section 1: Program Information</b>	
<b>Program Contact:</b>	Name: _____ Dept: _____
	Title: _____
	Telephone: _____ Email: _____
<b>Badge Description:</b> (500 or less characters)	
<b>Requirements for Completion:</b>	
<b>What are the educational and/or career objectives?</b>	
<b>Will this badge be a part of a series?</b> <i>If yes, please list the other micro-credentials in the series.</i>	Yes: _____ No: _____
<b>Level:</b>	____ Foundational ____ Intermediate ____ Advanced
<b>Type:</b>	____ Learning ____ Validation ____ Certification
<b>Who is Eligible?</b> <i>Please select all the apply.</i>	<input type="checkbox"/> TAMUK students only <input type="checkbox"/> Non-students/Community <input type="checkbox"/> Staff <input type="checkbox"/> Faculty <input type="checkbox"/> Other Please list: _____

<b>Instructional Method:</b>	_____ In Person    _____ Online    _____ Hybrid
<b>Marketable Skills:</b> <i>Please list any skills associated with this badge. These skills will be used to help students search for the programs that are relevant to their goals.</i>	
<b>Recommendations:</b> <i>Provide any additional badges, courses, etc the student could enroll in after receiving this badge.</i>	
<b>Website:</b> <i>Please list a URL for additional badge/department details.</i>	
<b>Badge Expiration:</b>	No Expiration: _____    Expiration Date: _____    Duration: _____

<b>Section 3: Campus Level Approval</b>	
	<b>Unit Head:</b>
	Name: _____ Title: _____
	Signature: _____ Date: _____
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	<b>Unit AVP:</b>
	Name: _____ Title: _____
Signature: _____ Date: _____	

<b>Section 4: Micro-Credential Committee Approval</b>	
	<b>Program Manager:</b>
	Name: _____ Title: _____
	Signature: _____ Date: _____

Please fill in all sections and email to [badging@tamuk.edu](mailto:badging@tamuk.edu).