

## Signature Page

**Degree and Certificate Options (check all that apply):**

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Associate of Science   | <input checked="" type="checkbox"/> Associate of Arts | <input checked="" type="checkbox"/> Certificate of Achievement |
| <input checked="" type="checkbox"/> New Program | <input type="checkbox"/> Substantial Change           | <input checked="" type="checkbox"/> Locally Approved           |

**Approved Program:** Cybersecurity

**College:** Cerritos College

**RECOMMENDED FOR APPROVAL BY THE LOS ANGELES/ ORANGE COUNTY REGIONAL CONSORTIA (LAOCRC):**

May 21, 2015  
Date

Lynn Shaw, PhD  
Name



Signature

**CAREER TECHNICAL EDUCATION (CTE) PROGRAMS ONLY:**

The program fulfills the requirements of employers in the occupation, provides students with appropriate occupational competencies, and meets any relevant professional or licensing standards.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature, Administrator of CTE

**CURRICULUM & INSTRUCTIONAL ADMINISTRATION:**

The program and courses have been approved by the curriculum committee and instructional administration, and satisfy all applicable requirements of the California Code of Regulations, Title 5.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature, Chair, Curriculum Committee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature, Articulation Officer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature, Chief Instructional Officer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature, President, Academic Senate

**LIBRARY AND LEARNING RESOURCES:**

Library and learning resources needed to fulfill the objectives of the program are currently available or are adequately budgeted for.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature, Chief Librarian/Learning Resources Manager