# Commission of the Council on Occupational Education EMPLOYER PROGRAM VERIFICATION FORM for Postsecondary Programs

### INSTRUCTIONS:

- Complete this form for each service area served by the program.\*
- This form must be signed by an employee who is in position to make hiring decisions on behalf of the employer.

Name of Institution	A second		
Florida Vocational Institute			
Address	City/Ctate/7:		
7757 West Flagler Street	City/State/Zip Miami, FL 33144		
Name of Program	Wildinii, FL 33144		
IT Security and Cloud Professional Engineer			
Mode(s) of Delivery of Program (check ALL that apply):			
100% Traditional Hybrid	X Distance Education		
The length of this program is (indicate the number of hours in Clock Hours 24 Semester Credit Hours	all boxes that apply):  Quarter Credit Hours		
The amount of tuition and fees charged for the total program is	s: \$ 15,225.00		
I have reviewed the (name of program): IT Security and Cloprogram and recommended requirements for admissions, program objectives, competency tests, instructional materials, equipment, proficiency required for completion, and appropriateness of the insprogram which include (check ALL that apply):  100% Traditional Hybrid	m content, program length, program		
EMPLOYER			
Company Name: Health Fornula Inc	Phone Number:  954-154-5950  ate/Zip:  Holly wood FL 33030		
	Holly wood FL 33070		
Verifiable range of remuneration (based on year-round, full-time employment) that can reasonably be expected by completers who enter this field upon completion of the program is from \$30,000 annually to \$40,000 annually.			
Signature:	Date: Occ 17, 2014		

## Commission of the Council on Occupational Education EMPLOYER PROGRAM VERIFICATION FORM for Postsecondary Programs

### INSTRUCTIONS:

Complete this form for each service area served by the program.\*

- This form **must** be signed by an employee who is in position to make hiring decisions on behalf of the employer.

	Name of Institution			
	Florida Vocational Institute			
	Address	City/State/Zip		
	7757 West Flagler Street	Miami, FL 33144		
	Name of Program			
	IT Security and Cloud Professional Engineer	ar and a second		
	Mode(s) of Delivery of Program (check ALL that apply):			
	100% Traditional Hybrid	X Distance Education		
The length of this program is (indicate the number of hours in all boxes that apply):				
	720 Clock Hours 24 Semester Credit	Hours Quarter Credit Hours		
	The amount of tuition and fees charged for the total pro	gram is: \$ 15,225.00		
	In have reviewed the (name of program):  IT Security and Cloud Professional Engineer program and recommended requirements for admissions, program content, program length, program objectives, competency tests, instructional materials, equipment, method of evaluation, the skills and/or proficiency required for completion, and appropriateness of the instructional delivery method(s) for the program which include (check ALL that apply):    100% Traditional   Hybrid   X   Distance Education   X			
	MPLOYER			
١	ame: Peter Genovich	Title: V.P Southeast Region		
C	ompany Name: Brightwing	Phone Number: 954.385.5405		
A	ddress: 3040 Universal Blvd., Suite 180	City/State/Zip: Weston, FL 33331		
Verifiable range of remuneration (based on year-round, full-time employment) that can reasonably be expected by completers who enter this field upon completion of the program is from \$38k annually to \$54k				
Si	gnature: filter	Date: /2/16/14		
	/ /			

## Commission of the Council on Occupational Education EMPLOYER PROGRAM VERIFICATION FORM for Postsecondary Programs

#### **INSTRUCTIONS:**

- Complete this form for each service area served by the program.\*
- This form **must** be signed by an employee who is in position to make hiring decisions on behalf of the employer.

Name of Institution			
Florida Vocational Institute			
Address	City/State/Zip		
7757 West Flagler Street	Miami, FL 33144		
Name of Program			
IT Security and Cloud Professional Engineer			
Mode(s) of Delivery of Program (check ALL that apply):			
100% Traditional Hybrid	X Distance Education		
The length of this program is (indicate the number of hours in all boxes that apply):			
720 Clock Hours 24 Semester Credit Hours	Quarter Credit Hours		
The amount of tuition and fees charged for the total program is: \$ 15,225.00			
EMPLOYERS' VERIFICATION STATE	=MENT·		
I have reviewed the (name of program): IT Security and Cloud			
program and recommended requirements for admissions, program	content program length program		
objectives, competency tests, instructional materials, equipment, me	ethod of evaluation, the skills and/or		
proficiency required for completion, and appropriateness of the instr	ructional delivery method(s) for the		
program which include (check ALL that apply):	, , , , , , , , , , , , , , , , , , , ,		
100% Traditional Hybrid	X Distance Education		
EMPLOYER			
Name: Kip True Title: Pr	resident		
Name: Kip True  Company Name: Oplinx, Inc.	esident Phone Number: 732-772-0405		
Name: Kip True Company Name: OpLinx, Inc.  Address: HOI Brickell Ave, South Tower 8th FL. Mice	732-772-0405		
Company Name:  Oplinx, Inc.  Address:  City/State	732-772-0405 =/Zip: LMi, FL 33131		
Company Name:  Optinx, Inc.  Address:  1101 Brickell Aue, South Tower 8th Ft. City/State Mic  Verifiable range of remuneration (based on year-round, full-time e expected by completers who enter this field upon completion of the pr	732-772-0405 e/Zip: LMi, FL 33131		