MyCAA Education & Training Plan (ETP)

Louisiana State University Shreveport
Division of Continuing Education and Public Service
One University Place | Shreveport, LA 71115-2399
https://www.ce.lsus.edu/

Student Information:

Student Name:	Enter student name
School Issued Student ID:	N/A
Program Name:	Business Law Specialist Certificate Program with Extersnhip
Program Type:	Certificate
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Program Duration:	6 Months
Scheduled Start Date:	Enter program start date
Estimated Completion Date:	Enter program end date
Course Delivery Format	Online
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Program Overview:

This Business Law Specialist Program is designed to introduce students to all business law concepts from their roots in common law through to elements of American and international law that make up this area of robust jurisprudence. Businesses operate every day under accepted theories of contract and tort law, promoting equitable transactions and ensuring corporate responsibility that advance accepted notions of good business practices. Corporations are also subject to various statutory frameworks that dictate the treatment and conditions of employees, ensure environmental protection and protect consumers from powerful organizations when necessary. Throughout this program, students will explore all of these issues and learn how the law applies to business operations every day.

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 are several National Certification exams that are available to students who successfully complete this program:
- ☐ Microsoft Office Specialist (MOS) Certification Exam.

Tuition Cost:

\$3.999

Course Breakdown:

Course Dieakuowii.		Course Credits (if	
Course/Program Code	Course/Program Title	applicable)	
LSUS-B-LAW	Business Law Specialist Certificate Program with Extersnhip	375 Contact Hours/ 37.5 CEU's	
School Official Certifica	tion:		
	rtify the above information is true, accura	te, complete, and being submitted on behalf of the institution	
By my signature below, I ce named in this document. Signature/Title of Authoriz		te, complete, and being submitted on behalf of the institution Date	