

# MyCAA Education & Training Plan (ETP)

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Delaware State University  
Testing Services and Programs  
1200 N. DuPont Highway  
Dover, DE 19901  
<https://www.desu.edu/academics/mycaa>

## Student Information:

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Student Name:	
School Issued Student ID:	N/A
Program Name:	Amazon Web Services with Cloud Practitioner Certificate Program with Externship C.2.90
Program Type:	Certificate
Program Duration:	6 Months
Scheduled Start Date:	
Estimated Completion Date:	
Course Delivery Format	Online

## Program Overview:

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This comprehensive program starts with foundational instruction on Amazon Web Services with coverage on cloud computing and available AWS services, as well as a guided hands-on look at using services such as EC2 (Elastic Compute Cloud), S3 (Simple Storage Service), and more. The Amazon Web Services (AWS) course is designed to provide a solid foundational understanding of the Amazon Web Services (AWS) infrastructure-as-a-service products. The program first covers concepts necessary to understand cloud computing platforms, working with virtual machines, storage in the cloud, security, high availability, and more.

The AWS Certified Cloud Practitioner content provides several hours of instruction that contain slides, audio descriptions, and video captures. Demonstrations of Amazon Web Services and third-party cloud solutions are included to provide a clear guide to understanding the services offered by Amazon Web Services and the needs those services meet.

## Certification/Licensure Eligibility upon Program Completion:

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\* Students should have or be pursuing a high school diploma or GED.

\* Students who complete this program will be eligible to sit for the Amazon Web Services Certified Cloud Practitioner Exam

## Tuition Cost:

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\$3,999

**Course Breakdown:**

Course/Program Code	Course/Program Title	Course Credits (if applicable)
DESU-IT-AWSCLOUD	Amazon Web Services with Cloud Practitioner Certificate Program with Externship	375 Contact Hours / 37.5 CEU's

**School Official Certification:**

By my signature below, I certify the above information is true, accurate, complete, and being submitted on behalf of the institution named in this document.

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**Signature/Title of Authorized School Official**

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**Date**

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**School Official Printed First and Last Name**

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**School Official E-mail and Phone Number**