

MyCAA Education & Training Plan (ETP)

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

Student Information:

Student Name:	_____
School Issued Student ID:	N/A
Program Name:	Photography Entrepreneur with Adobe Certificate Program with Externship C.2.82
Program Type:	Certificate
Program Duration:	6 Months
Scheduled Start Date:	_____
Estimated Completion Date:	_____
Course Delivery Format	Online

Program Overview:

Photographer entrepreneurs start their own photography businesses. Often they work within a specialized niche or group of niches and market their services to specific target markets. In addition to having photography knowledge and skills, the Photography Entrepreneur with Adobe must also acquire business savvy, including how to establish a legal form of the business, how to write a business plan, how to brand and market the business, and how to use the numerous types of contracts required to comply with copyright and other types of photography-related laws. This course covers the basics of becoming a photographer, setting up a photography business and developing retouching and artistic skills that enhance your images using Adobe Photoshop.

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 is a National Certification exam available to students who successfully complete this program:

- Adobe Certified Associate (ACA) Exam for Visual Communication Using Adobe Photoshop (PS)
- Microsoft Office Specialist (MOS) Certification Exam.

Tuition Cost:

\$3,950

Course Breakdown:

Course/Program Code	Course/Program Title	Course Credits (if applicable)
DESU-PEAP	Photography Entrepreneur with Adobe Certificate Program with Externship	495 Contact Hours/ 49.50 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.

Signature/Title of Authorized School Official

Date

School Official Printed First and Last Name

School Official E-mail and Phone Number