

# Cybersecurity Certificate Of Technical Studies



**GREAT FALLS  
COLLEGE**

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**MONTANA STATE  
UNIVERSITY**

## **Student Information & Application Packet** *(Applications are subject to change year to year)*

### **2020-2021 Intake**



**APPLICATION PROCESS FOR**  
**CYBERSECURITY CERTIFICATE OF TECHNICAL STUDIES**  
**GREAT FALLS COLLEGE MONTANA STATE UNIVERSITY**

Dear Prospective Cybersecurity Certificate of Technical Studies Program Student:

The primary purpose of the Cybersecurity Certificate of Technical Studies Program is to (1) allow current Computer Technology professionals a pathway to transition to work in the cybersecurity sector by familiarizing them with work processes, practices, and culture of cybersecurity; and (2) to permit current technology students the opportunity to transition into the discipline of cybersecurity technology by familiarizing them with the use of computer systems to effectively conceptualize, design, procure, and/or build secure information technology (IT) systems. This program is delivered completely on-line through Great Falls College Montana State University (GFC MSU).

This is a challenging program, and to help ensure that applicants to the program are prepared for what will be taught, the following must be complete and provided to the Admissions Department at GFC MSU, for consideration by Program faculty.

- All applicants must be admitted to the College and be in good academic standing prior to applying to the Cybersecurity Certificate of Technical Studies Program. Acceptance to GFC MSU requires a completed admissions application file. Please visit the campus, call the College (406) 268-3700 or 1-800-446-2698, or apply online at <http://admissions.gfcmsu.edu/apply.html>

**THEN**

- A completed Application Packet Cover and Check-Off Sheet must be included by **all** students entering the program (Check-Off Sheet included in this packet)

**Cybersecurity Certificate of Technical Studies Intake Criteria:**

Applicants must meet **one** of the bulleted intake criteria listed below:

- Completed one of the following degrees within the last 8 years: *Associates or Bachelor's degree in Network Support and Security, Programming, Microcomputer Support or similarly related degree in Information Technology/Information Systems. Provide Transcript(s).*
- Currently enrolled in a two- or four- year degree at least sophomore level in Network Support and Security, Programming, Microcomputer Support or similarly related degree in Information Technology/Information Systems. *Provide most recent transcript.*
- Related work experience with consent of the program director. *Provide proof of relevant work experience in the form of resume and a reference questionnaire from at least two work-related individuals, one being a direct supervisor. Industry certifications such as A+, Microsoft Servers, Net+, Security+, or others may be used in place of degree requirements when combined with relevant work experience.*

For individuals not meeting the above qualifications, the list of pre-requisite courses below must be completed with a grade of C- or better. Individuals not meeting one of the criteria above can pursue an AAS in Cybersecurity, which would include a foundation for coursework and a career in Cybersecurity. See the catalog at <http://catalog.gfcmsu.edu/academic-programs/cybersecurity-aas/>. No criteria or restrictions exist for entry to the AAS program.

| Code                     | Title                           | Credits |
|--------------------------|---------------------------------|---------|
| <a href="#">CSCI 105</a> | Computer Fluency                | 3       |
| <a href="#">ITS 210</a>  | Network OS - Desktop            | 3       |
| <a href="#">ITS 215</a>  | Network OS -Dir /Infrastructure | 4       |
| <a href="#">ITS 224</a>  | Introduction To Linux           | 4       |
| <a href="#">ITS 280</a>  | Computer Repair & Maintenance   | 4       |

- Many students need preliminary math and writing courses before enrolling in the program requirements. These courses may increase the total number of program credits. Students should review their math and writing placement before planning out their full program schedules.
- *Unofficial transcripts may serve as the basis for provisional admission to the program, but official transcripts must be provided to the Registrar's Office at GFC MSU prior to the end of the first semester of study.*

**Applications for the 2020-2021 year may be received on a rolling basis, based upon timing of the start of the term. Provide all applicable application materials in one envelope to:**

Great Falls College MSU Admissions Department  
 Cybersecurity Certificate of Technical Studies Program Admissions  
 2100 16<sup>th</sup> Avenue South  
 Great Falls, MT 59405

- Please send all application items as a completed packet. Items sent separately and at random are easily lost or misfiled. We are not responsible for any late, lost or misfiled information. Please only send required documentation as other supplemental items will be discarded.
- It is the applicant's responsibility to ensure that all requirements are met by the established deadline. Deadlines, guidelines, and policies apply equally to all students; thus, there can be no exceptions.
- Great Falls College MSU's Cybersecurity CTS Program does not maintain a waiting list. Applicants must reapply each year.
- All application materials will be subject to the approval of the Cybersecurity CTS Program Director.
- Applicants will be notified of acceptance on a rolling basis.

Please direct questions about the program to the Program Director, Steve Robinett, at [steven.robinett@gfcmsu.edu](mailto:steven.robinett@gfcmsu.edu) or 406-268-3721.

For questions about admission to the College, please call 406-268-3700 or 800-446-2698, or email [admissions@gfcmsu.edu](mailto:admissions@gfcmsu.edu)

## **Student Health Insurance Option (*Subject to change*)**

All GFC MSU students enrolled for 6 or more credits are required to have health insurance. For students without coverage, GFC MSU offers a program developed especially for students by Blue Cross/Blue Shield of Montana. This plan provides coverage for injuries and illnesses on or off campus. Please contact Student Central for more information. **Please see <http://students.gfcmsu.edu/insurance.html> for more information.**

Student Central  
Great Falls College MSU  
Phone: 406-771-4304

## **Information Regarding Transferable Courses**

Coursework taken at other educational institutions may be designated as equivalent courses for Great Falls College MSU. For a current listing of approved equivalent courses, visit the Transfer Guide under Student Information at [https://prodmyinfo.montana.edu/pls/gfagent/hwzkxfer.p\\_selstate](https://prodmyinfo.montana.edu/pls/gfagent/hwzkxfer.p_selstate).

The transferring student must initiate the request for evaluation of credit during the admissions process by furnishing an official transcript from the transferring institution(s) and the necessary materials, including copies of the appropriate catalog descriptions or course syllabi, to the Registrar. Official transcripts must be sent directly by the issuing institution to the following address:

Registrar's Office  
Great Falls College MSU  
2100 16th Ave S  
Great Falls, MT 59405

## **Equal Opportunity Policy**

Great Falls College MSU is committed to the provision of equal opportunity for education, employment, and participation in all College programs and activities without regard to race, color, religion, national origin, creed, service in the uniformed services (as defined in state and federal law), veteran status, gender, age, political ideas, marital or family status, physical or mental disability, genetic information, gender identity, gender expression, or sexual orientation.

The College's Equal Opportunity Officer is the Chief Student Affairs & Human Resources Officer, 2100 16th Avenue South, Great Falls, MT 59405. Telephone: 406-771-4300



**GREAT FALLS COLLEGE MONTANA STATE UNIVERSITY**  
**CYBERSECURITY CERTIFICATE OF TECHNICAL STUDIES**

**APPLICATION PACKET COVER & CHECK-OFF SHEET**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ST \_\_\_\_\_ Zip Code \_\_\_\_\_

TELEPHONE (Home) \_\_\_\_\_ (Other) \_\_\_\_\_

E-Mail ADDRESS \_\_\_\_\_

GFC MSU STUDENT IDENTIFICATION NUMBER: \_\_\_\_\_

Please indicate which one of the required criteria applies to you and that you have included the necessary documentation:

**For Students Currently Enrolled at Great Falls College MSU in a Related Degree**

|   |   |
|---|---|
| √ |   |
|   | Currently Enrolled at Great Falls College MSU in Related Degree   |
|   | Application Packet Cover and Check-off Sheet (personal information must be complete)  |
|   | Completed at least two semesters of study in related degree program.  |
|   | In Good Academic Standing. All students must be in good academic standing which means they are not on academic probation OR academic probation continued, OR academic suspension. Good academic standing will be verified by the Registrar and any applicants who are not in good academic standing will not be admitted to the program. Students are encouraged to check with the Registrar's or Admissions Office to confirm that they are in good academic standing. |

**For Applicants Not Currently Enrolled at Great Falls College MSU**

|   |   |
|---|---|
| √ |   |
|   | <b>Option 1:</b> Completed one of the following degrees within the last 8 years: <i>Associates or Bachelor's degree in Network Support and Security, Programming, Microcomputer Support or similarly related degree in Information Technology/Information Systems</i>                     |
|   | Unofficial transcript(s) included or official transcripts sent directly to the Registrar's Office. (Official Transcripts should be sent directly to the Registrar and not included in the packet. Official Transcripts will be required prior to the end of the first semester of study). |
|   | <b>Option 2:</b> Currently enrolled in a two- or four-year degree at least sophomore level in Network Support and Security, Programming, Microcomputer Support or similarly related degree in Information Technology/Information Systems at a school other than Great Falls College MSU.  |
|   | Unofficial transcript(s) included or official transcripts sent directly to the Registrar's Office. (Official Transcripts should be sent directly to the Registrar and not included in the packet. Official Transcripts will be required prior to the end of the first semester of study). |
|   | <b>Option 3:</b> Related work experience with consent of the program director. Industry certifications may be used in place of degree requirements when combined with relevant work experience.   |
|   | Proof of relevant work experience in the form of a resume included  |
|   | Reference questionnaire from at least two work-related individuals, one being a direct supervisor included (see pages 7-9 of application packet)  |
|   | OPTIONAL: Proof of industry certifications such as A+, Microsoft Servers, Net+, Security+, or others  |

## Check-off List for New Applicants to Great Falls College MSU

| √ | <b>Items Needed</b>  |
|---|--|
|   | <b>Application Packet Cover and Check-off Sheet</b> (personal information must be complete)  |
|   | <p><b>All applicants must have a Complete Admissions File and be ready for registration.</b><br/>           A completed admissions file and ready for registration includes:</p> <ol style="list-style-type: none"> <li>1. Completed application to GFC MSU</li> <li>2. Payment of the \$30 application fee (if applicable)</li> <li>3. Copies of high school/GED/HiSET transcripts or diplomas or equivalent</li> <li>4. Proof of MMR shots</li> <li>5. Completion of placement testing or submission of official college transcript(s) verifying placement.</li> </ol> <p>Complete admissions files and ready for registration status will be verified by the Registrar's Office and applicants not meeting criteria will not be admitted to the program. Students are encouraged to check with the Admissions Office to confirm that their admissions file is complete and they are ready for registration.</p> |
|   | <p><b>In Good Academic Standing.</b> All students must be in good academic standing which means they are not on academic probation OR academic probation continued, OR academic suspension. Good academic standing will be verified by the registrar and any applicants who are not in good academic standing will not be admitted to the program. Students are encouraged to check with the registrar's or admissions office to confirm that they are in good academic standing.</p>  |



**GREAT FALLS COLLEGE MONTANA STATE UNIVERSITY CYBERSECURITY  
CERTIFICATE OF TECHNICAL STUDIES**

**PROFESSIONAL REFERENCE QUESTIONNAIRE  
Applicant Instructions:**

**For Students without A Qualifying Degree:**

The purpose of the Professional Reference Questionnaire is to enable you, the applicant, to provide **independent** evidence that your work experience fits the definition of qualifying work and that your skills, knowledge and attitudes are consistent with the core competencies of the Cybersecurity Certificate of Technical Studies Program.

Applicants for the Cybersecurity Certificate of Technical Studies Program designation are asked to provide professional references according to the criteria set forth below. If references do not meet the criteria, they will not be accepted as part of this application. **Please choose references carefully according to the following:**

**Criteria for Professional References:**

- the entire questionnaire must be completed by the professional reference him/herself (not by the applicant or a third party)
- one reference must be the applicant's current supervisor/manager (person who conducts the applicant's performance evaluation)
- a minimum of two references must work in the Computer Information Technology field.
- a reference must have known the applicant for a minimum of one year
- a reference must have direct and up-to-date knowledge of the applicant's practice (i.e., should have directly observed the applicant in practice within the past three years)
- applicants' family members, employees and subordinates are not eligible to act as references

Please direct questions about the program to the Program Director, Steve Robinett, at [steven.robinett@gfcmu.edu](mailto:steven.robinett@gfcmu.edu) or 406-268-3721.



**GREAT FALLS COLLEGE MONTANA STATE UNIVERSITY**  
**CYBERSECURITY CERTIFICATE OF TECHNICAL STUDIES**

**PROFESSIONAL REFERENCE QUESTIONNAIRE**  
**Reference Instructions:**

Thank you for agreeing to assist Great Falls College Montana State University in its Cybersecurity Certificate of Technical Studies Program application process. The purpose of the Professional Reference Questionnaire is to enable the applicant to provide independent evidence that his/her work experience fits the definition of qualifying work and that his/her skills, knowledge and attitudes are consistent with the core competencies of the Cybersecurity Certificate of Technical Studies Program. **All information provided in this document is strictly confidential.**

**Note: References may not be family members and must have known the applicant in a professional capacity for at least one year.**

**PLEASE PROVIDE THE FOLLOWING INFORMATION:**

Name of Applicant for whom you are providing a reference: \_\_\_\_\_

Your Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street / P.O. Box City / Town Zip Code

Phone/Email: \_\_\_\_\_  
Phone Email

1. Do you work in the Computer Information Technology Field? Yes No

a. If you answered "YES" to question 1 above, how many years have you worked in the field? \_\_\_\_\_

b. If you answered "NO" to question 1 above, what is your profession? \_\_\_\_\_

If you answered "NO" to question 1 above, rate your knowledge of the scope of the Computer Information Technology Profession on a scale of 1 to 10 (10 being highest). \_\_\_\_\_

2. What is your job/position title: \_\_\_\_\_

3. Company Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street / PO Box City / Town Zip Code

4. Is the applicant an immediate family member, employer or supervisor? Yes \_\_\_ No\_\_\_

5. What is your relationship to the applicant? (Supervisor, colleague, etc.) \_\_\_\_\_

6. How long have you known the applicant in a professional capacity? \_\_\_\_\_

7. When is the last time you directly observed the applicant in practice? \_\_\_\_\_

8. How frequently have you directly observed the applicant in practice? \_\_\_\_\_

9. Please review the descriptions of qualifying work experience below and indicate with a “√” in the box(s) at the right the category or categories which best describe your observation of the type(s) of qualifying experiences the applicant provides.

**Qualifying Areas of Work Experience**

|                          |   |
|--------------------------|---|
| <input type="checkbox"/> | <p><b>1. Adheres to the Code of Ethics</b></p> <p>a. Follows the Code of Ethics and applies Ethical Decision-Making</p>   |
| <input type="checkbox"/> | <p><b>2. Demonstrates Professional Attributes</b></p>   |
| <input type="checkbox"/> | <p><b>3. Demonstrates a Commitment to Professional Development</b></p> <p>a. Develops relationships with other professionals</p> <p>b. Demonstrates a commitment to lifelong learning</p> <p>c. Keeps up-to-date with technology</p>                              |
| <input type="checkbox"/> | <p><b>4. Uses Analytical Skills</b></p> <p>a. Applies a solution-focused framework</p> <p>b. Collects, analyzes and uses information to make decisions</p>  |
| <input type="checkbox"/> | <p><b>5. Manages Work</b></p> <p>a. Uses planning and time management skills</p> <p>b. Follows project management procedures</p> <p>c. Documents customer/co-worker interactions and progress</p> <p>d. Evaluates the service provided to customers/co-worker</p> |

6. Please indicate with a “√” in the box at the right how you rank the applicant as a candidate for successful completion of the academic challenges of the Cybersecurity CTS Program.

|  |   |   |   |
|--|---|---|---|
| <input type="checkbox"/> <b>HIGHLY RECOMMEND</b> | <input type="checkbox"/> <b>RECOMMEND</b> | <input type="checkbox"/> <b>NOT RECOMMEND</b> | <input type="checkbox"/> <b>UNABLE TO JUDGE</b> |
|--|---|---|---|

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Print entire questionnaire and initial each page to indicate you completed this reference yourself. To ensure confidentiality and credibility, please seal this questionnaire in an envelope, sign over the seal and return it to the applicant to include with his/her application.**

**Thank you for completing this Professional Reference Questionnaire.**

Note: We only accept professional references if included with the application. We do not accept professional references submitted directly to us. References received in advance of an application will be returned to sender. Please direct questions about the reference questionnaire to the Program Director, Steve Robinett, at [steven.robinett@gfcmsu.edu](mailto:steven.robinett@gfcmsu.edu) or 406-268-3721.