**New Program Proposal Initial Feedback Form**

Program Proposal:

Reviewer:

Date:

Please refer to the “New Program Application” (copy attached) as we reflect upon this proposal. In other words, have each been addressed and, if not, what is missing? Please refer to the following checklist derived from the application. Various terms are included in the CAEP Glossary (<http://caepnet.org/glossary?letter=A>) and additional information is available in the “Resource Section” at the end of this form. If questions, let me know at [sbogan@doe.in.gov](mailto:sbogan@doe.in.gov).

**C8. Overview and Rationale**

|  |  |  |  |
| --- | --- | --- | --- |
| Overview and Rationale | Yes | No | Unclear |
| * Proposal clearly described the purpose or goal of the program. |  |  |  |
| * License earned upon completion was identified. |  |  |  |
| * Degree major awarded upon completion was identified. |  |  |  |
| * Proposal clearly described the rationale of the program. |  |  |  |
| * Additional governance or entity approval required is identified, as well as anticipated date of decision, if applicable. |  |  |  |

**Other comments:**

**C9. Clinical Experiences**

|  |  |  |  |
| --- | --- | --- | --- |
| Clinical Experiences (respond to the following if this is an “initial program”\*) | Yes | No | Unclear |
| * Proposal clearly described the clinical experiences required in the program area. |  |  |  |
| * Duration and timing (i.e. at what phase it occurs in the program) of field experiences and student teaching or internship/practicum is appropriate. |  |  |  |
| * Handbooks and resource guides for student teaching were provided. |  |  |  |
| * State requirements for student teaching are addressed (10 weeks, full-time, and with supervising teacher rated effective or highly effective). |  |  |  |
| * Supervision of clinical experiences explained and description or samples of evaluation tools and rubrics were provided. |  |  |  |
| Clinical Experiences (respond to the following if this is an “advanced program”) |  |  |  |
| * Description of clinical experience(s) provided, including type, duration, setting, etc. |  |  |  |
| * Handbooks and resource guides for internships/practicums were provided. |  |  |  |
| * Clinical experience, as described, will provide an opportunity for authentic practice (real classroom practice, exposure to school setting, etc.) in the area of specialization. |  |  |  |
| * Supervision of clinical experience explained and description or samples of evaluation tools and rubrics were provided. |  |  |  |

**\*Initial and advanced are defined in the “Resource Section” at the end. If unsure, contact me at** [**sbogan@doe.in.gov**](mailto:sbogan@doe.in.gov)**.**

**Other comments:**

**C10. Program of Study**

|  |  |  |  |
| --- | --- | --- | --- |
| Program of Study | Yes | No | Unclear |
| * Overall plan of study was included with list and sequencing of required courses and/or experiences (field experiences, requirements beyond the classroom, etc.). |  |  |  |
| * Course titles/numbers and descriptions were included (or equivalent if a non-higher education program). |  |  |  |
| * If applicable, all “non-course or non-credit granting” requirements were clearly explained. |  |  |  |
| * Matrix or matrices showing alignment between coursework and educator standards were provided. |  |  |  |
| * How candidates will be introduced to the REPA/REPA 3 Educator Standards was addressed. |  |  |  |
| * How program will ensure candidates are aware of the standards during each phase of the program was addressed. |  |  |  |

**Other comments:**

**C11. Faculty or Instructional Leaders**

|  |  |  |  |
| --- | --- | --- | --- |
| Faculty or Instructional Leaders | Yes | No | Unclear |
| * Information was provided for every faculty member or position (if not yet filled) responsible for professional coursework, clinical supervision, or administration. |  |  |  |
| * Highest degree required for each position was provided. |  |  |  |
| * Assignment or role of faculty member or position was provided. |  |  |  |
| * At least one example of professional work or leadership within past three (3) years and related to content area was provided (example may pertain to either a current faculty member or an example of what will be required for someone in a particular position within the program). |  |  |  |
| * Description of recent P-12 experience, including discipline, grade level of assignment, P-12 licensure status, expected of faculty or position(s) was provided. |  |  |  |

**Other comments:**

**C12. Clinical Educators**

|  |  |  |  |
| --- | --- | --- | --- |
| Clinical Educators | Yes | No | Unclear |
| * Process by which program plans to select clinical educators at both the EPP and school-based (P-12) settings was provided. |  |  |  |
| * Summary of the evaluation process for clinical educators, including pertinent evaluation tools was provided. |  |  |  |
| * Explanation provided on how program will ensure clinical educators will provide a positive impact on candidate preparation. |  |  |  |

**Other comments:**

**C13/C14. Candidate Support**

|  |  |  |  |
| --- | --- | --- | --- |
| Candidate Support | Yes | No | Unclear |
| * Specific intervention strategies for candidates struggling in the program was provided. |  |  |  |
| * How program will support students who are struggling and/or having difficulty passing a required assessment (program or EPP) was addressed. |  |  |  |

**Other comments:**

**C15. Diversity and Technology**

|  |  |  |  |
| --- | --- | --- | --- |
| Diversity and Technology | Yes | No | Unclear |
| * Description of how diversity will be integrated within this program was provided. |  |  |  |
| * Description of how technology will be integrated within this program was provided. |  |  |  |

**Other comments:**

**C16. Assessments**

|  |  |  |  |
| --- | --- | --- | --- |
| Content and Pedagogy/Developmental Assessments | Yes | No | Unclear |
| * Name of the required content/pedagogical assessment(s) and when successful completion will be required was included. |  |  |  |
| Non-state Required Assessments |  |  |  |
| * At least four (4) additional assessments or summary of planned assessments (other than content and pedagogical/developmental assessments) were provided. |  |  |  |
| * Course grades were provided for no more than one assessment. |  |  |  |
| * A copy or description of each assessment and scoring guide/rubric was provided. |  |  |  |

**Other comments:**

**C17. Alternative Programs**

|  |  |  |  |
| --- | --- | --- | --- |
| Special Education | Yes | No | Unclear |
| * Program includes option or route for those seeking a license in special education. If yes, please respond to the rest of the following items; if no, please continue to the next page. |  |  |  |
| * Program proposal includes an outline or written plan describing how candidates will receive focused preparation in special education. |  |  |  |
| * Course descriptions or syllabi reflect high-quality professional development that is sustained, intensive, and classroom-focused.\* |  |  |  |
| Completer/Employer Support |  |  |  |
| * Program proposal includes plans for supporting special education teachers following program completion and employment in a special education assignment. Includes description and examples of continuous support efforts, resources, and quality professional development opportunities in special education. |  |  |  |
| * Proposal includes plans for collaborating with both program completers and their employers to conform to the requirements of 511 IAC 7-36-3; see *Reference Section*, #4 at the end of this document. Please note, 511 IAC 7-36-3(b) indicates the added requirements for special education teachers participating in an alternative program in order to obtain a special education license. |  |  |  |

**Other comments:**

**Concluding Comments**

|  |
| --- |
| **Overall strengths of proposal:** |
| **Overall issues, concerns, weaknesses of proposal, red flags, etc.?** |
| **Questions or requests for additional information before next meeting?** |

**Resource Section**

#1. Field experiences usually occur early in the program, prior to student teaching. Clinical experiences include field experiences culminating in a student teaching experience. Note:

* + - * Indiana requires “student teaching” (see #2) only once and for “initial” licensure as a teacher. It is not required for license additions or additional licensure in other content or advanced areas.
      * “Advanced programs” include programs leading to an additional area on an existing license OR graduate-level programs for other school professionals outside of “instructional areas” (school counseling, school/district leadership, school librarian, etc.).
      * Clinical experiences at the advanced level are specific to the uniqueness of advanced level programs. Advanced candidates may, for example, be required to:

Use their own classrooms or schools for field or clinical experiences;

Complete an internship;

Complete a project with a cooperating school outside place of employment (school leadership, for instance), etc.

Important: The IDOE does not dictate the length of clinical experiences within advanced areas nor does it dictate a minimum number of credits required. **However, both initial and advanced programs are expected to seek, if available, national recognition with the Specialized Professional Association (SPA) unique to the program. Each SPA has its own set of standards and expectations and may include a minimum number of credits/weeks/hours of clinical experience in order to receive full recognition.** If the proposal is within an area for which there is a SPA then we should see considerable reference to the SPA within the proposal. (SPA listing: <http://caepnet.org/accreditation/caep-accreditation/spa-standards-and-report-forms>)

#2: Student teaching is defined as “a supervised teaching practice occurring near the end of an applicant’s approved program” (511 IAC 10.1-1-1, Sec. 1, (32). It must include “a minimum of ten (10) weeks of full-time student teaching during the later stages of the program with a teacher who holds a professional, proficient, practitioner, or accomplished practitioner license” (511 IAC 15-1-2, Sec. 2, (1), (B), (iii) for elementary and stated for other grade settings as well). Please see REPA 3 at <https://www.in.gov/doe/educators/educator-licensing/repa-3/>.

#3: Indiana Educator Standards: <https://www.in.gov/doe/educators/educator-licensing/indiana-educator-standards/>

*Resource Section continued…..*

#4: 511 IAC 7-36-3 Special education teachers

Authority: IC 20-19-2-8; IC 20-19-2-16

Affected: IC 20-19-2; IC 20-33

Sec. 3. **(a) A special education teacher who teaches in a public elementary, middle, junior high, or high school in the state must meet the following requirements**:

1. The teacher has obtained full state licensure as a special education teacher, including licensure obtained through an alternative route, as described in subsection (b), or passed the state special education teacher licensing examinations and holds a license to teach in the state as a special education teacher.
2. The teacher has not had special education licensure requirements waived.
3. The teacher holds at least a bachelor's degree.

**(b) A teacher will meet the requirement in subsection (a)(1) if that teacher is participating in an alternative route to special education licensure program under which the**:

(1) teacher:

1. receives high-quality professional development that is:

(i) sustained;

(ii) intensive; and

(iii) classroom-focused;

in order to have a positive and lasting impact on classroom instruction, before and while teaching;

1. participates in a program of intensive supervision that consists of structured guidance and regular ongoing support for teachers or a teacher mentoring program;

(C) assumes functions as a teacher only for a specified period of time not to exceed 5three (3) years; and

(D) demonstrates satisfactory progress toward full licensure as prescribed by the state; and

(2) state ensures, through its licensure process, that the provisions in subdivision (1) are met.