



INDIANA DEPARTMENT OF EDUCATION  
REPORT FORM FOR STATE REVIEW OF IL/PB

**A: INSTRUCTIONS**

A. Carefully review each of the following sections and submit responses and additional evidence or documents (Word documents, pdf materials, etc.) electronically to [sbogan@doe.in.gov](mailto:sbogan@doe.in.gov). **Please do not mail materials.** You are welcome to develop your own format but it must include all of the information requested below.

**B: INFORMATION**

1. Name of institution or other entity offering program: 2. Address: 3. Name of Program:	4. Website or link where program information is available to the public: 5. Program Type (Transition to Teaching, MAT, etc.): 6. Method of Delivery (online, onsite, hybrid, blended):	7. List any other site, if any, where program is offered: 8. Degree awarded upon completion, if applicable: 9. Type/title of Indiana license received upon completion: 10. Grade setting (P-3, K-6, etc.):
11. Name of Preparer(s): 12. Phone: 13. E-Mail:	14. CAEP Coordinator(s): 15. Phone: 16. E-Mail:	17. Type of accreditation your Educator Preparation Program (EPP) is seeking: <input type="checkbox"/> NCATE/CAEP accreditation (first or initial) <input type="checkbox"/> Continuing NCATE/CAEP accreditation
18. Type of Report (select): <input type="checkbox"/> Initial Review <input type="checkbox"/> Response to "Further Development Required" or "At Risk" status <input type="checkbox"/> Response to "State Recognized with Conditions"		

**C: REQUIRED INFORMATION/DOCUMENTATION**

Provide a description and/or response for each of the following items. You may insert information within this document, attach as part of submission, and/or a combination of both. There are no character limits.

1. Provide a description of the clinical experiences required within this program. Include duration and timing of both field experiences and internships/practicums.
2. Provide a program of study (below or attached) that includes admission requirements and a listing of the courses and experiences required for candidates to complete the program. Please include course titles and numbers and, if possible, a link to your course catalog and/or online program page.
3. Starting with the most recent academic year for which data is available, provide at least three years of data for both enrolled individuals and the subset of program completers. Provide separate data if program is offered at more than one site.

Academic Year (Indicate Start and End Dates Below)	Total Number of Individuals Enrolled in the Program	Subset of Program Completers
__/__/__ to __/__/__		
__/__/__ to __/__/__		
__/__/__ to __/__/__		

4. Describe the process by which you and your partners select clinical educators at both the EPP and school-based (applicable grade setting within P-12) settings and how you ensure each demonstrates a positive impact on candidate preparation. Be sure to include a summary of the selection process used in selecting high quality clinical educators and the evaluation process that follows.

5. Performance Assessments: Provide name, type, and timing of at least five (5) assessments required of all candidates in this program. Two (2) of the required assessments include state-required assessments and the remainder are non-state or EPP-developed assessments. Attach a copy or description of the non-state assessments and include a scoring guide/rubric. You may provide more than three (3) non-state assessments but no more than seven (7) assessments total (state and non-state) should be included below.

Assessment Type and Focus	Name of Assessment	Type of Assessment	When Administered in Program
A. Content knowledge (state assessment)			
B. Content knowledge (additional non-state assessment; may include transcript review process)			
C. Developmental/Pedagogical assessment (state assessment)			
D. Assessment of student teaching/internship performance (non-state; example assessment may or may not be used for all candidates)			
E. Assessment (may include content specific) demonstrating candidate impact on student (applicable grade setting within P-12) learning (non-state)			
F. Optional Additional Assessment			

6. Provide at least three years or cycles of data for three (3) non-state assessments listed above. If data is not available, then please be sure to provide any generic assessments, scoring guides, surveys, thresholds, etc. that will be used to determine level of sufficiency. (Be sure to review “Appendix G - Assessment Rubric” in the CAEP handbook.) Program quality for all state assessments also will be reviewed using data submitted for the state “non-ranking matrix” required in state code (IC 20-28-3-1 and IC 20-28-11.5-9).  
 Note: Data may include new and old assessments. Areas with enrollments under ten (10) over three cycles can aggregate data and report one aggregated data point for the three cycles.

7. Provide at least one example (describe below or attach sample) where the results of one of the assessments in #5 has been or will be used to improve candidate performance and/or the program. Provide a general description of the results (no individual names or test scores, etc.), the resulting changes and any measureable improvement(s). If not yet implemented or completed, describe what changes or improvements are planned and the anticipated results.

8. Provide the following information for each EPP or non-EPP faculty member or instructor responsible for professional coursework, clinical supervision, or supervision. Include any educator(s) directly involved in teaching any course(s) in this program.

- A. Faculty/Instructor Name;
- B. Highest Degree Earned;
- C. Assignment or role of each;
- D. Title or position of each;
- E. Describe recent experience of each in P-12 schools and current P-12 licensure status (valid or expired), as well as name of issuing state(s).

9. How are candidates in this program introduced to the REPA/REPA 3 Educator Standards? How do you ensure your candidates are aware of the standards during each phase of the program?

10. Diversity and technology are both important cross-cutting themes in educator preparation. Describe how both are integrated within this program. Provide at least one example or evidence for each. (Examples: field and clinical experiences, seminars, work samples, implementation of technology in variety of settings, community partnerships, etc.)

#### **D. SUBMISSION OF REPORT**

1. Submit the above and all related to documents to Scott Bogan, Coordinator of Educator Preparation, at [sbogan@doe.in.gov](mailto:sbogan@doe.in.gov). DO NOT MAIL!
2. An email message will be sent to both the preparer and coordinator (identified above) verifying receipt of materials. If you do not receive an email receipt within 48 hours, then please call 317-232-9178.

\*Initial licensure/post-baccalaureate (IL/PB) programs are designed for candidates who enter the program having been prepared in the content area. Admission requirements generally include a bachelor's degree in a licensure content area and/or life experience in the content field, as well as a minimum grade point average and/or testing. IL/PB programs include Transition to Teaching, Master of Arts in Teaching (MAT), and similar programs. The primary focus of the programs are to ensure candidates already experienced and knowledgeable in a content area receive the necessary pedagogical/development preparation for teaching the content area in a particular grade setting. Most programs are 18 months or less in duration. Some, such as T2T, are not to exceed a certain number of credits.