CAMPBELLSVILLE UNIVERSITY SCHOOL OF EDUCATION Candidate Continuous Assessment Plan and Curriculum Guide Teacher Leader Master of Arts in Education (TLMAE)

| Name | | | (Ma | iden) | | CU ID # | Date | /_ | / |
|-----------------|----------------------|--|-----------------|-------|----------------|------------------------|---------------------|-----------|---------|
| DOB/ | '/ | _ Gender: | M F | Ethni | city | | | | |
| Permanent A | ddress: Street_ | | | | | City | | S | tate |
| Zip | | Home Phone _ | / | / | Cell | // | Work | / | / |
| Email | | | | | | | | | |
| | Work | | | | Home | | | | |
| | l of Certification | | 5 5-9 | 5-12 | 8-12 | P-12 | | | |
| Current Empl | ` ' | <i>,</i> | | | _ | | | | |
| | District | t | | | | | School | | |
| CAP 5* | CAP 6 | CAP 7 | | ** | | | | | |
| **Teacher Leade | er Master's Action R | CAP 5); PGP collected Research Project; Lea | dership Profess | | Plan; Assessme | ent Design Project req | uired for program c | ompletion | (CAP 7) |

The teacher leader program is available as an endorsement option.

| CAP 5 - Entrance Requirements | CAP 6 – Mid-Point | CAP 7 – Exit Requirements |
|---|--|--|
| Application | | |
| Bachelor's Degree from accredited institution | | |
| State Degree | GPA (minimum 3.0) | Transcript Review |
| | Con dit Harres Consulated | GPA (minimum 3.0) |
| Copy of valid Teacher's Certificate or Statement of Eligibility | Credit Hours Completed (15 earned hours) | Transcript Attached |
| Official TranscriptYN | (13 carried ribars) | rranscript / teached |
| | Disposition Recommendation | Master Action Research Project Grade |
| Cumulative GPA 2.75 or 3.0 on last 30 hoursYN | (Faculty) | |
| | | Oral Presentation on MARP |
| GPA Review date:/ | | Leadership Professional Growth Plan |
| Professional Growth Plan (PGP); if teaching, submit the one | | Leadership Frotessional Growth Flair |
| on file with the district of employment | | Assessment Design Project Grade |
| | | |
| Three (3) Disposition recommendations (recommended: immediate | | Two Disposition Recommendations |
| supervisor, colleague, self) | | (1) (self) (2) (faculty) |
| (1) (2) (3) | | (1) (Sell) (2) (laculty) |
| () | | CA-1 Form Completed and Attached |
| One –page essay on rationale for graduate study | | |
| VV Codo of Fabino (signad) | | Exit/Completer Survey |
| KY Code of Ethics (signed) | | Application for Additional Credentials |
| Character & Fitness(signed) | | |
| | | Graduation Application |
| Diversity Survey Signed | | |
| State Criminal Background Check | | Transcript Request |
| (if not teaching) | | Endorsement (check one if applicable) |
| Statement of Acknowledgement/Commitment | | |
| (signed) (see back of form) | | Environmental Education |
| Curriculum Contract/Guide sheet (signed) | | 20 Field Hours |
| Option Selected: | <u>PRAXIS Disclaimer:</u> Teacher certification requirements are subject | ESL |
| ESL Endorsement | to change. Before registering for the | 30 Field Hours |
| | test(s) please refer to the KY Education | Praxis II (5362); 155 passing score |
| Gifted and Talented Endorsement | Professional Standards Board website | |
| | at http: www.kyspsb.net for current | Gifted and Talented |
| Environmental Education Endorsement | requirements_or contact 502-564-4606 or toll free 888-598-7677. | 30 Field Hours Praxis II (5358); 157 passing score |
| Professional Specialty Option: specify area | OF LOTH THE 600-330-7077. | FIGXIS II (3330), 137 passing score |

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|-----------------|---|---------------------|-------------|--------------|--|
| | | | | | |
| Name(Maiden) | | CU ID # | | Date// | |
| | Curricul | um Guide | | | |
| . Profession | al Core: 18 hours | um Guide | | | |
| Course No. | Course Title | <u>Hours</u> | <u>Term</u> | <u>Grade</u> | |
| ED 599 | Entry to TP+ | 0 | | | |
| D 655 | Empowering Teacher Leaders | 3 | | | |
| D 660 | Formative Assessment & Intervention | 3 | | | |
| D 665 | Research Methods | 3 | | | |
| D 670 | Action Research Practicum I | 1.5 | | | |
| D 675 | Action Research Practicum II | 1.5 | | | |
| D 685 | Digital-Age Technology | 3 | | | |
| D 690 | Supervision of Instruction | 3 | | | |
| If currently em | ployed with a school district, a criminal background chec | k may not be requir | ed. | | |
| | | | | | |
| II. Professio | nal Specialty Option: 12 hours | | | | |
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| II. Additiona | l Courses (as arranged or required): | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | Total # Hours (30-33) | | | | |
| | | | | | |

Statement of Acknowledgement/Commitment

As a student in the education preparation program, I understand and agree to the following:

- 1. To be retained in the program and to be eligible for continuation and completion, I must satisfactorily meet all requirements of CAPs 5, 6, and 7.
- 2. Upon final approval of CAP 5, I will receive a letter of notification to be used for admission and registration.
- 3. Neither Campbellsville University nor any professor or administrator assumes responsibility for the CAPs nor for graduation; the responsibility resides with me.
- 4. I will participate in all online class sessions and teleconferences. I will follow the online procedure list provided.
- 5. I will follow the correct procedures for state certification.
- 6. I commit to upholding the Code of Ethics for Kentucky School Personnel.
- 7. I am committed to the ethical and legal use of technology.
- 8. I am committed to abide by the School of Education policy on plagiarism and cheating.

My signature below indicates I hereby recognize it is my responsibility to review and ensure I complete the above requirements for successful continuation in and exit from this program.

| Name/Date | Advisor/Date | |
|---|-------------------------------------|---|
| | | |
| | | |
| | | |
| | This Section is for Office Use Only | |
| | | |
| CAP 5 Presented to Faculty/ | CAP 7 Decision: | Program Satisfactorily Completed |
| Letter of Notification Mailed | | Program <u>Not</u> Satisfactorily Completed |
| Copy of Letter Included in Student File | | |
| Recommended for Admission | | |
| Not Recommended | | |