

ADE/CTE Sponsored or Approved Professional Development for CTE Certification Application

Application deadlines: May 1 and December 1, of each year

Date: _____
CTED/District/College Name/Professional Organization: _____
Contact Person: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____
Title of Professional Development (PD) Activity: _____
Number of clock hours required to complete the PD (15 clock hours = 1 credit): _____

Submit questions and/or electronic application to Angela Hardy at Angela.Hardy@azed.gov

1) Please indicate the certification requirements your professional development activity addresses (mark all that apply):

Principles/Philosophy of Career and Technical Education
Instructional Delivery, Facilitation, and Methodologies in CTE
Instructional Technology
Curriculum Design and Development including Best Practices in CTE
Assessment, Monitoring, Evaluating and Reporting Progress
The Learning Environment, including Classroom Management
Teaching Students with Exceptionalities

2) Describe how the Professional Development applies to each of the above MARKED categories:

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- 3) **Please copy and paste or attach the syllabus or detailed course outline** that includes the research used in developing the professional development activity. *Professional Development should improve the learning of all students through research-based instructional strategies and prepare them for all types of classroom assessments.*
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- 4) **Please list the expected outcomes/objectives of the course** (including product, projects, assignments participants will complete). *Professional Development activity should lead to improved classroom practice.*

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- 5) **Please describe how you will measure the completion of course objectives/outcomes and include a copy of the evaluation tool for the PD activity.** *A measurement tool should be able to identify that the learner has successfully completed the course or activity and be able to identify the skills they will take to the classroom.*

