INSTRUCTIONAL COACHING ENDORSEMENT

Application for the Utah State Board of Education

APPLICANT INFORMATION

Name: _____ CACTUS ID#: _____

E-mail: _____

PURPOSE

This endorsement, when attached to a current Educator License, verifies that the individual has the skills and knowledge necessary to facilitate effective, job-embedded professional learning to improve educator practice and positively impact student outcomes.

ENDORSEMENT REQUIREMENT AREAS

PREREQUISITES: I have met ALL of the following requirements and provided the HR Experience Prerequisite Form:
- ☐ At least 5 years of classroom teaching
- ☐ Experience as an instructional coach or teacher leader
- ☐ Experience providing instruction or professional learning to adult learners
- ☐ At least 3 consecutive years of educator evaluations of "effective" or higher
- ☐ At least 1 year of full-time employment in the Utah education system

Which of the following requirement areas did you complete? Only *one* demonstration of competency needed per requirement area. Note that only approved University Courses are eligible for the indicated path below. The list of approved courses can be found here.

1. **Foundations of Instructional Coaching**
   - ☐ *Approved University Course*
   University: _____ Course code: _____
   Course name: _____ Semester/Year: _____ Grade: ____
   - ☐ *Approved District/Charter course*
   District/Charter: _____ Grade: ____
   Date completed and posted in MIDAS:_____
   - ☐ *Foundations of Instructional Coaching Microcredential Stack*
   Date completed and posted in MIDAS:_____

2. **Adult Learning Theory**
   ☐ *Approved University Course*
   University: _____ Course code: _____
   Course name: _____ Semester/Year: _____ Grade: ____
   ☐ *Approved District/Charter course*
   District/Charter: _____ Grade: _____
   Date completed and posted in MIDAS:_____
   ☐ *Adult Learning Theory Microcredential Stack*
   Date completed and posted in MIDAS:_____

3. **Instructional Design and Assessment**
   ☐ *Approved University Course*
   University: _____ Course code: _____
   Course name: _____ Semester/Year: _____ Grade: ____
   ☐ *Approved District/Charter course*
   District/Charter: _____ Grade: _____
   Date completed and posted in MIDAS:_____
   ☐ *Instructional Design and Assessment Microcredential Stack*
   Date completed and posted in MIDAS:_____
   ☐ *National Board Certification*
   Date completed: _____

4. **Strategies for Effective Instructional Delivery**
   ☐ *High-Leverage Practices Microcredential Stack*
   Date completed and posted in MIDAS:_____
   ☐ *National Board Certification*
   Date completed: _____
   ☐ *Area 4 Competency Rubric* *Signed by Supervisor*
   Date signed: _____

5. **Effective Leadership and Collaboration**
   ☐ *Teacher Leader Microcredential Stack*
   Date completed and posted in MIDAS:_____
   ☐ *Utah Teacher Fellow Membership – Hope Street Group*
   Dates of fellowship: _____
   ☐ *Area 5 Interview and Competency Rubric* *Signed by Supervisor*
   Date signed: _____

APPLICANT'S SIGNATURE

I certify that the information contained in this application is true.

☐   I have submitted any required documentation such as original transcripts, certifications, MIDAS transcripts, etc.

☐   Electronic transcripts must be sent directly from the College/University clearinghouse to the USBE Licensing Department at transcripts@schools.utah.gov.

Educator Signature: _____ *Date:* _____

Submit Completed Application & Attachments on the USBE SM Apply site:
https://usbelicensing.smapply.us/