Washington Association for Career and Technical Education

CTE Director Preparation Program Application

All Application Materials DUE by Friday, April 14, 2023 at 11:59 pm PST

**Purpose of the WA-ACTE CTE Director Preparation Program is to:**

* Prepare future CTE administrators for their role
* Ensure CTE director candidates have the knowledge, skills, and abilities to be successful administrators
* Provide relevant learning directly connected to the role of a CTE administrator
* Prepare candidates for the CTE director certificate

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| CTE Director Preparation Entry Requirements | CTE Director Certification Requirements: |
| * Completed Application
* Detailed Resume
* No more than two-page letter, single spaced, 12-point font, expressing your interest in and commitment to participating in the WA-ACTE CTE Director Preparation Program. In addition, candidates should present thoughtful responses to the following questions:
1. Why are you pursuing this program and how will it help you achieve your professional goals? How has your experience influenced your interest in pursuing these goals?
2. Provide an example of an obstacle that you have had to overcome as you pursued your professional goals and what did you learn from that experience?
3. What meaningful projects are you interested in engaging in during the program to support your leadership growth in CTE?
4. What additional supports might you need to be successful in completing this program?
* Two completed CTE Director Preparation Program Recommendation Forms (attached)
* Approval from supervisor and district superintendent to participate fully in program
* Must have a mentor throughout program that currently holds a state CTE administrator certificate and agrees to participate in mentor training and to support the mentee
 | * Hold a residency, continuing, or professional administrator certificate **OR**
* Three years of experience as a certified CTE teacher, CTE administrator, CTE counselor, or CTE occupational information or CTE career guidance specialist.
* Complete a state authorized CTE administrator training program
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**Criteria to be considered for this program:**

There are a limited number of candidates accepted into this program each year.

* Candidates must register and attend the WA-ACTE 2023 Summer Conference, the WACTA fall and spring conferences, and the WA-ACTE 2024 Summer conference as part of the program expectations
* Candidates must commit to attending the 2-day, once per month Friday and Saturday sessions
* Candidates must have a CTE mentor that has earned their CTE director certificate from OSPI
* Candidates must commit to completing all work associated with program completion
* Candidates must be members of both WACTA and WA-ACTE

All requirements of the application listed above must be completed in order to be considered for this program. **Please submit your completed application and associated materials by 11:59 pm, April 14, 2023. Submit completed application to** **shaniw@cateconsulting.org****.**

A committee of the PEAB will review each application. The review committee considers the following factors in assessing applicants:

* Strength of academic and technical education and experience
* Potential for educational and professional leadership
* Fluency in oral and written communication
* Compatibility of applicant’s stated professional goals and the program

If you have questions or need assistance in completing your application, please contact Tim Knue at tim@wa-acte.org, or Shani Watkins at shaniw@cateconsulting.org.

**Candidate Information:**

|  |  |  |
| --- | --- | --- |
| Applicant Name:  | Work Email Address:  | Personal Email Address:  |
| Home Address:  | City/State/Zip | Personal Phone Number:  |
| Current Position (Title):  | School/District: | Work Phone Number:  |
| School Address:  | City/State/Zip |  |
| Are you currently serving as a CTE Director, or have you been assigned the role for the next school year?  | Yes/No |
| Have you been teaching CTE for at least three years?  | Yes/No |
| List current educational certification number and educational certification type you currently hold:  |

**Program Expectations:**

 I agree to complete all program expectations by the established deadlines in order to complete the program and gain approval to apply for the CTE director certificate through OSPI. If I do not complete the program expectations, I understand that I will not be considered a completer of this program. If I do not participate in the program or do not complete assignments, I understand that I will be removed from the program and will not complete the requirements to apply for the CTE Director Certification through OSPI. **All associated costs of the program are non-refundable.**

**Candidate Financial Obligations:**

* I understand that I must submit the $3,500 program fee upon official acceptance to the WA-ACTE CTE Director Preparation Program.
* I understand that release time to attend the conferences and the one Friday once per month sessions for a total of 12-15 days is required. Offsite attendance is required for all in-person sessions across the state
* I understand that I must register and attend the WA-ACTE 2023 Summer Conference, WACTA fall and spring conferences, and WA-ACTE 2024 Summer Conference
* I understand that I am responsible for any associated conference registration costs (approximately $1,700 for all conferences), meals, transportation, and hotel costs associated with the WA-ACTE CTE Director Preparation Program

o I understand that I am financially obligated to pay for all costs associated with participation in this program

**Anti-Discrimination Policy Agreement:**

The following polices have been set forth to notify applications of the WA-ACTE anti-discrimination policy. Please read the following polices before submitting your application and acknowledge that you have read and understand the policy:

WA-ACTE does not discriminate based on race, color, sex, sexual orientation, creed, religion, age, national origin, disability, marital status, veteran status, citizenship status, genetic information or any other attribute or characteristic protected by law. Our association is dedicated to ensuring the fulfillment of this policy with respect to the selection process.

Any violation of this policy will not be tolerated and will result in appropriate disciplinary action. If an applicant believes someone has violated this policy or otherwise has questions regarding this policy, the applicant may bring the matter to the attention of the executive director.

 o I have read and understand the anti-discrimination policies

Candidate Full Name Signature Date

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| --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School District is committed to supporting this candidate in the CTE director preparation program. The school district and/or candidate applicant agree to the following: * Payment of the program fee of $3,500
* release time to attend the conferences and the one Friday and Saturday once per month sessions for a total of 12-15 days is required. Offsite attendance is required for all in-person sessions across the state
* Assign a qualified mentor for the duration of the CTE program OR working with WA-ACTE CTE preparation program to find a qualified mentor to support the candidate. Mentors must be currently state certified as CTE directors in Washington
* Attend all scheduled training sessions
* Register and attend WA-ACTE 2023 and 2024 Summer Conferences in full
* Register and attend the WACTA 2023 fall and 2024 spring conferences in full

**Signatures**: all signatures are required. If an individual serves more than one position as listed below, please have that individual sign all applicable categories.  |
| **SUPERINTENDENT (OR DESIGNEE)**Printed Name: Signature: Title: Date:  |
| **CAREER AND TECHNICAL EDUCATION DIRECTOR/ADMINISTRATOR**Printed Name: Signature: Title: Date:  |
| **CANDIDATE’S SUPERVISOR**Printed Name: Signature: Title: Date:  |
| **APPLICANT**Printed Name: Signature: Title: Date:  |

**WA-ACTE CTE DIRECTOR PREPARATION PROGRAM**

**REFERENCE FORM**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Candidate Last Name Candidate First Name Candidate School/District

has applied for admission to the CTE Director Preparation Program and wishes to pursue the following administrative credential for Career and Technical Education Director.

**IMPORTANT:**

This candidate is required to provide confidential references covering the last three years of educational service and has given your name for that purpose. At least one of the two reference forms must be completed by a current supervisor. Please carefully evaluate the candidate in terms of your professional contact with him/her, by completing the information requested below. Please understand that the single most important criteria that will determine admittance to the CTE Director Certification Program is the strength of his/her school district references. The PEAB Committee will review all applications, including the reference forms. This information is completely confidential and will not be shared with the candidate. The candidate understands that this is a confidential reference and that WA-ACTE and its partners cannot share confidential information with the candidate.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Candidate signature acknowledging that this is a confidential reference and that WA-ACTE and its partners cannot share the information provided in this reference with the candidate.

**RETURN by Friday, April 14, 2023, to:**

**Tim Knue**, Executive Director, WA-ACTE, tim@wa-acte.org

Email Subject line must state: **CTE DIRECTOR PREPARATION PROGRAM/Candidate last name**

**THIS INFORMATION IS CONSIDERED CONFIDENTIAL**

What was your job title at the time you worked with this candidate? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What was the candidate's job title? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This employment relationship was from \_\_\_\_\_\_\_\_to\_\_\_\_\_\_\_\_ in the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ school district.

**Where responses are indicated, would you please make comments as necessary and rate the candidate based on a 1 – 4 scale by circling the appropriate number.**

**The rating scale is as follows:**

**1 = Unacceptable**

**2 = Acceptable with reservations**

**3 = Acceptable**

**4 = Outstanding**

1. The candidate exhibits a strong desire to succeed and continually seeks the opportunity to imprve self and CTE programs.

 **Rating 1 2 3 4**

1. The candidate is frequently asked for his/her opinions and advice; subordinates and peers respect his/her answers, judgment, and methods.

 **Rating 1 2 3 4**

1. The candidate is a good decision maker. As a director, the candidate would likely make decisions quickly and decisively after exploring options, being sensitive to peoples’ needs, and considering Career and Technical Education state compliance, district goals and objectives.

 **Rating 1 2 3 4**

1. The candidate demonstrates positive skills in human relations and interpersonal relationships with students and adults.

**Rating 1 2 3 4**

1. What are the candidate’s strengths?
2. Do you have any reservations about this candidate’s participation in the WA-ACTE CTE Director Administration Preparation Program?
3. Is there anything else you believe we should know about this candidate?

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Print Name Title

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Signature

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Address Date

**WA-ACTE CTE DIRECTOR PREPARATION PROGRAM**

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Print Name Title

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Signature

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