|  |  |
| --- | --- |
|  | **Career and Technical Education (CTE)**  **Clock Hour Proposal Form** |

Clock Hour rules: [WAC 181-85](https://apps.leg.wa.gov/wac/default.aspx?cite=181-85&full=true) - *Professional Certification – Continuing Education Requirement*

Must be completed and submitted to Career & Technical Education ([CTE](mailto:susan.locke@k12.wa.us)) **30 days in advance** of the in-service for approval. *Note: OSPI only provides OSPI clock hours for OSPI hosted professional development (PD) and partnered events.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Submitted By:** | | | |
| **Name:** Required | | **District/Organization:** Required | |
| **Phone:** Required | | **Email:** Required | |
| **Title of PD:** Required | | **Subtitle of PD:** Optional | |
| **PD Description:** Required | | | |
| **Total Number of Clock Hours:** Required (Minimum of 60 minutes – [WAC 181-85-030 (6)](https://apps.leg.wa.gov/wac/default.aspx?cite=181-85-030)) | | | |
| **Objectives:** *Provide detail that aligns with content standards listed below written in* ***Teacher Will Be Able To******format.*** | | | |
| 1. Required | | | |
| 2. Required | | | |
| 3. Required | | | |
| 4. Optional | | | |
| **Clock Hour Credit Type:** *Select the content standards that apply.* | | | |
| **Continuing Education Standards:** *Must select at least one*. ([WAC 181-85-202](https://apps.leg.wa.gov/WAC/default.aspx?cite=181-85-202))  1. Opportunities for participants to collect and analyze evidence related to student learning  2. Professional certificate standards  3. Paraeducator standards of practice as described in Title 179 WAC  4. School and district improvement efforts  5. Education frameworks and curriculum alignment  6. Research-based instructional strategies and assessment practices  7. Content of current or anticipated assignment  8. Advocacy for students and leadership  9. Supervision, mentoring, or coaching  10. Building a collaborative learning community  **Equity Standards:** *Check the box If seeking Cultural Competency, Diversity, Equity, and Inclusion (CCDEI) standards (*[*WAC 181-85-204*](https://app.leg.wa.gov/WAC/default.aspx?cite=181-85-204)*).*  **Equity Hours Requested:** Click or tap here to enter text.  **STEM Standards:** *Check the box if seeking STEM-related subject-area teacher endorsement standards (*[*RCW 28A.410.221*](https://app.leg.wa.gov/rcw/default.aspx?cite=28A.410.221)*).*  **STEM Hours Requested:** Required if requesting STEM | | | |
|  | | | |
|  | | | |
|  | | | |
|  | | | |
|  | | | |
| ***IF seeking STEM clock hours, complete supporting documentation below:*** | | | |
| *(Must include content from 2 of the 4 STEM elements. Mark all that apply)* | | | |
| Science | Technology | Engineering | Mathematics |
| *To qualify as a STEM course, each guiding question must be answered with a “Yes” and evidence supplied for each question. Evidence can be used from the course description, objectives, or agenda. You may also add additional information that provides rationale for the guiding questions.* | | | |
| **Will the STEM activity have an impact on STEM experiences for students?**  Yes  No **Describe the impact:** Required | | | |
| **Does the STEM activity provide examples or resources to use with students or with other educators?**  Yes  No **Describe the impact:** Required | | | |
| **Does the STEM activity provide examples/resources about STEM-related career choices to use with students?**  Yes  No **Describe the impact:** Required | | | |
| ***IF seeking Equity clock hours, complete supporting documentation below:*** | | | |
| *Must select at least one* [*CCDEI standard*](https://drive.google.com/file/d/162UmX3OYX-EzJ7ApbQJVuUAF6qr2K2LZ/view?pli=1)*.*  Understanding Self and Others  Student, Family, and Community Engagement  Learning Partnerships  Leading for Educational Equity***:*** | | | |
| **Describe how this proposal meets the standard(s):** Click or tap here to enter text. | | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Events Details:** *Please submit separate applications for repeated events if the audience or location is new.* | | | | | | | |
| **Type of Event:**  Choose an item. **Event Visibility:** Choose an item. | | | | | | | |
| **Location Name:** Click or tap here to enter text. | | **Street Address:** Click or tap here to enter text. | | **City, State, Zip Code:** Click or tap here to enter text. | | | |
| **Online Meeting/Registration Link:** Required for online meeting | | | | | | | |
| **Attendance Tracking Plan** *(attendance due to OSPI 2 weeks after event ends)***:** Click or tap here to enter text. | | | | | | | |
| **Agenda Attached** – *Times and expanded descriptions of events must be included (MS Word or Adobe)*  **Agenda Link:**  Optional | | | | | | | |
| **Session(s) Details:** *\*If your event spans multiple days, please provide the details for each day/session.* | | | | | | | |
| **Date** | **Session Times** | | **Check-In/Check-Out Times (OPTIONAL)** *(Note that check-in/check-out times* ***cannot*** *be included in the calculation of clock hours)* | | **# Of GENERAL Clock Hours Offered Per Session** | **# Of STEM Clock Hours Offered Per Session** | **# Of Equity Clock Hours Offered Per Session** |
| Click or tap to enter a date. | Click or tap here to enter text. | | Optional | | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap to enter a date. | Click or tap here to enter text. | | Optional | | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap to enter a date. | Click or tap here to enter text. | | Optional | | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap to enter a date. | Click or tap here to enter text. | | Optional | | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap to enter a date. | Click or tap here to enter text. | | Optional | | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| **Presenters:** *(List ALL main instructors presenting during event. Please include a resume for each presenter)* | | | | | | | |
| **Name** | **Email** | | **Phone #** | | **Resume Attached** | | |
| Click or tap here to enter text. | Click or tap here to enter text. | | Click or tap here to enter text. | | Yes  Already on file | | |
| Click or tap here to enter text. | Click or tap here to enter text. | | Click or tap here to enter text. | | Yes  Already on file | | |
| Click or tap here to enter text. | Click or tap here to enter text. | | Click or tap here to enter text. | | Yes  Already on file | | |
| Click or tap here to enter text. | Click or tap here to enter text. | | Click or tap here to enter text. | | Yes  Already on file | | |
| Click or tap here to enter text. | Click or tap here to enter text. | | Click or tap here to enter text. | | Yes  Already on file | | |
| Click or tap here to enter text. | Click or tap here to enter text. | | Click or tap here to enter text. | | Yes  Already on file | | |
| Click or tap here to enter text. | Click or tap here to enter text. | | Click or tap here to enter text. | | Yes  Already on file | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Return to:** | | | |
| Career and Technical Education  Office of Superintendent of Public Instruction  P.O. Box 47200  Olympia, WA 98504-7200 | [**CTE@k12.wa.us**](mailto:CTE@k12.wa.us) | | 360-725-6245 |
| **OSPI USE ONLY** | | | |
| **Received Date:** Click or tap to enter a date. | | **Response to Submitter Date:** Click or tap to enter a date. | |
| Approved  **Event ID #:** Click or tap here to enter text.  Denied  **Additional Information Requested:**  Click or tap here to enter text. | | | |