

**Community College Certificates Approval Process**

**to meet \*ARS 15-391 5 k and l for CTED Eligibility and Perkins performance measures**

1. **CTED or community college requestor** will complete the “[Community College Certificate Application](https://cms.azed.gov/home/GetDocumentFile?id=5b3127a21dcb2510acc4c772) ” and submit it to the Arizona Department of Education/Career and Technical Education unit (ADE/CTE), no earlier than March 1st of each year, through the CTED inbox, [CTED@azed.gov](mailto:CTED@azed.gov) .
2. ADE/CTE will set a meeting with the **CTED and community college to** review the application with the appropriate Program Specialist. If changes are needed to the application, ADE/CTE will indicate during the meeting and allow time for corrections or additions.
3. All applications will be reviewed by August 31st of the year submitted and if approved will be added to the CTED list only for that specific CTED beginning the current school year. Approved Community College Certificates will be allowable as Perkins V performance Measures for member districts of that CTED only.

The timeline for the process is as follows:

**Beginning March 1, 2021**, the application process for the **Community College Certificate Application** will **open on** **March 1st** of each year and will **close on July 31st** of that same year. Submissions for the Community College Certificate Application list must be received by **5:00 pm on July 31st** for of the current year to be considered for the current school year submitted.

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| **Certifying Organization and CTED** |  | | | | | | | | | | | |
| **Name of Specific Credential** |  | | | | | | | | | | | |
| **Description of Credentials** |  | | | | | | | | | | | |
| **Entry-Level Annual Salaries** |  | | | | | | | | | | | |
| **CTE or LOP**  **Program Alignment** |  | | | | | | | | | | | |
| **Industry-Based Certification Requirements: Students** | | | | | | | | | | | | | |
| **Standard / Curriculum** |  | | | | | | | | | | | |
| **Testing Methodology**  ***(consists of two tests)*** | **Paper?** | Choose an item. | | | **Online – Cognitive portion** | | Choose an Item | | | **Performance Exams / Tests? Psychomotor portion** | | Choose an item. |
| **Re-Testing (if available)** | **Re-Testing Procedures:** | |  | | | | | | **Max # of Attempts Allowed:** | | Select Max attempts | |
| **Testing Details (including any age requirements / accommodations)** |  | | | | | | | | | | | |
| **Industry-Based Certification Requirements: Teachers** | | | | | | | | | | | | | |
| **Instructor Certification Requirements (by certifying agency)** |  | | | | | | | | | | | |
| **Proctoring / Test Security (if any)** |  | | | | | | | | | | | |
| **Certification Tracking** | | | | | | | | | | | | | | |
| **Credentialing Documentation** |  | | | | | | | | | | | | |
| **Certification Tracking System** | **Online Tracking System?** | | | Choose an item. | | **Details** | |  | | | | | |
| **Other Details** | **Expiration**  **Timeline?** | | |  | | | | | | | | | |
| **Certification Costs / Funding Sources** | | | | | | | | | | | | | | |
| **Cost Details** |  | | | | | | | | | | | | |
| **Re-test / Refund Policies** |  | | | | | | | | | | | | |
| **For More Information** | | | | | | | | | | | | | | |
| **Certifying Agency Contact Info** |  | | | | | | | | | | | | |



**Community College Certificate Application**

**For CTED Eligibility and/or Secondary Perkins Performance Measures**

**\*ARS 15-391 5 k and l for CTED Eligibility**

1. Submitting Organization-CTED name with affiliated Community College name Click or tap here to enter text.

2. Name of specific Community College Certificate of Completion/Proficiency

Click or tap here to enter text.

3. Community College Program Website link to community college program that shows course names, course/program outcomes Click or tap here to enter text.

4. List the specific courses required to obtain the certificate Click or tap here to enter text.

5. Specific program requirements such as age, graduation, etc. Click or tap here to enter text.

**Community College Review Checklist**

Name of Certificate and program alignment: Click or tap here to enter text. , Click or tap here to enter text.

Date of review meeting: Click or tap to enter a date.

Attendees: Click or tap here to enter text.

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| **Evident** | **Not**  **Evident** |
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All questions are fully answered based on a Certificate of Completion/Proficiency, application and fact sheet match and complement

**Application**

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|  |  | 1. Link to Community College program website |
|  |  | 1. List of courses required for certificate |
|  |  | 1. Projected length of time for high school student to complete (can a HS student complete this by September 30 after leaving high school?) |

**Fact Sheet**

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|  |  | 1. Specific name of certificate of completion |
|  |  | 1. Description accurately explains the certificate |
|  |  | 1. Aligns with an Approved CTE or LOP program |
|  |  | 1. Courses required to attain the certificate |
|  |  | 1. Testing details and security describe Community College testing requirements |
|  |  | 1. Credentialing documentation describes Community College tracking of certificate |

Notes

Click or tap here to enter text.