



## PROFESSIONAL DEVELOPMENT PLAN - University Courses

[For first time **Secondary (LOS)** and **Postsecondary (PLOS)**

**Limited Occupational Specialist** educators]

This **Professional Development Plan (PDP)** conveys your intent, with the agreement of your employer or supervisor (per signatures below), to successfully complete the coursework through the university to move from the Limited Occupational Specialist (PLOS/LOS) to the Standard Occupational Specialist (PSOS/SOS) Certificate at the conclusion of the PLOS/LOS validity period. If choosing this option, this form must be included as an attachment in the application packet when applying for the initial certification.

|   |   |  |
|---|---|--|
| <b>Name:</b>  |   | <b>EDUID Number:</b>   |
| <b>Home Address:</b>  |   | <b>Home/Cell Phone:</b>                                      |
| <b>Work Address:</b>  |   | <b>Work Phone:</b>   |
| <b>Current Position:</b>  |   |  |
| <b>Current Credential(s) Held:</b> <i>Currently applying for Postsecondary/Secondary Limited Occupational Specialist Certificate.</i>   |   |  |
| <b>Credential(s) Sought:</b> <i>Seeking Postsecondary/Secondary Standard or Advanced Occupational Specialist Certificate.</i>   |   |  |
| <b>Professional Development Plan Goal Statement:</b><br><i>Within the three-year validity period of the Limited Occupational Specialist, engage in educator pedagogical training to qualify for a Standard or Advanced Occupational Specialist Certificate upon renewal.</i>  |   |  |
| <b>ACTIVITY PLANNED:</b><br>Course / Workshop / Seminar   | <b>Location of Activity/University*</b>   | <b>Date(s) Planned</b>                                       |
| Core: Educator Standards  | Online through IDCTE                      |  |
| <b>Block A:</b> Launching Your Classroom with Confidence  | In Person (determined yearly) and Virtual |  |
| *Methods of Teaching CTE  | BSU - ISU - U of I                        |  |
| *Principles/Philosophies of CTE   | BSU - ISU - U of I                        |  |
| +Evaluation and Assessment  | BSU - ISU - U of I                        |  |
| +Guidance/Transition to Work  | BSU - ISU - U of I                        |  |
| +Occ Analysis/Curriculum Design<br><small>(If applicant is not taking Occ Analysis/Curriculum Design course, participation in the occupational analysis and curricula design training through IDCTE is recommended)</small>   | BSU - ISU - U of I                        |  |
| Of the above five university courses, IDAPA 08.02.02 requires courses marked with an asterisk (*). The candidate must additionally elect to complete two of the three courses marked with "+" based on the advisement of the university CTE teacher educator.   |   |  |
| <b>Local Supervisor Printed Name</b>  |   | <b>Title/Institution for Local Supervisor</b>                |
| <b>Local Supervisor Signature</b>   |   | <b>Date</b>  |
| <b>University CTE Teacher Educator Printed Name</b>   |   | <b>Title/Institution for University CTE Teacher Educator</b> |
| <b>University CTE Teacher Educator's Signature</b>  |   | <b>Date</b>  |
| <b>Applicant's Signature</b>  |   | <b>Date</b>  |
| Revisions to this PDP can be made with IDCTE certification director and supervisor approval. Make note of changes on this sheet and send a copy to IDCTE educator certification at <a href="mailto:certification@cte.idaho.gov">certification@cte.idaho.gov</a> . Upon approval, a signed copy will be returned to candidate. |   |  |
| <b>IDCTE USE ONLY:</b><br>PDP Received by IDCTE on date: _____ PDP validity period: _____   |   |  |

\*University contacts:

**Boise State University** | Sherry Dismuke

**Idaho State University** | Dr. Brenda Jacobsen

**University of Idaho** | Dr. John Cannon

Revised 10.27.2025