District/Charter and Mentor Recommendation for CTE Alternative Authorization

This form must be completed, signed, and included with the application for completers of Career Technical Education (CTE) Alternative Authorization to qualify for the Idaho five-year renewable certificate. The intent of this form is to verify completion of a one-year state-board approved mentor program and successful evaluations.

Section I – Applicant's Full Legal Name	Date of Birth	EDUID (Optional)

Section II – Route Option Completed
Check the applicable program completed

- ☐ Option 1: IDCTE Route Plan or IDCTE Program of Study
- ☐ Option II: Master's Degree and Mentoring Route
- ☐ Option III: Content Assessment and Mentoring Route

Section III – Endorsement/Assignment Verification
List the endorsement title, assignment/area of instruction taught, and content grade level range.

Endorsement Title	Assignment/Area of Instruction and Content Grade Level

Section IV – Mentor Verification
The mentor assures the candidate demonstrates the competencies below:

- ☐ The mentor assures the applicant is able to develop and revise a classroom management plan to include managing classroom procedures for efficient operation of the classroom and responding to student behavior to maximize instruction.
- ☐ The mentor assures the applicant is able to develop a variety of instructional strategies to engage students in learning, meet the needs of diverse learners, and differentiate instruction.
- ☐ The mentor assures the applicant is able to create, revise, implement, administer, and interpret student performance data from a variety of assessment types, including but not limited to formative, interim and summative assessments.

Signature of the Mentor Teacher	Date

Printed Name	Title

Section V – District/Charter Verification The district/charter assures the candidate has completed the items below:	
District/Charter:	District/Charter #:
☐ The administrator assures the applicant has completed a one (1) year mentor program based on the Idaho Mentor and Induction Program Standards established by the State Board of Education.	
☐ The administrator assures the applicant has achieved one (1) year's successful evaluations in the assignment area which aligns to the endorsement(s) listed above. Section 33-1001 (20), Idaho Code.	
☐ The administrator assures the applicant has developed an Individual Professional Learning Plan (IPLP).	
Signature of Administrator	Date
Printed Name	Title
The superintendent/charter administrator verifies the information in this form is true and accurate and recommends the candidate for a five-year renewable certificate and/or endorsement.	
Signature of Superintendent/Charter Administrator	Date
Printed Name	Title