Any District I.S.D.

Career and Technical Education

Program Evaluation: 2015-2016

|  |  |  |
| --- | --- | --- |
| Name: | Campus: | Date: |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Please indicate the cluster in which you teach: | | | | Include the following attachments:   * #3 Lesson plan: integration * #4 Conference attendance * #5 Special Populations training * #6 Lesson plan * #10 ATC Certification * #12 Syllabi * #13 Flyer Non-traditional enrollments * #15 Example non-discrimination statement * #18 Spanish/English flyer for promoting programs * #20 CTSO Student Roster |
|  | Agriculture Food & Technology |  | Health Science |
|  | Business, Management and Administration |  | Science, Technology, Engineering & Math |
|  | Finance |  | Manufacturing |
|  | Marketing, Sales & Service |  | Architecture & Construction |
|  | Information Technology |  | Arts, A/V Technology and Communications |
|  | Education and Training |  | Law, Public Safety, Corrections and Security |
|  | Human Services |  | Government and Public Administration |
|  | Hospitality and Tourism |  | Transportation, Distribution and Logistics |

|  |  |  |
| --- | --- | --- |
| Courses taught: |  |  |
|  |  |  |
| Note: This evaluation is subject to Federal and State audit. Please be accurate and complete all questions. You may type your answers or use ink. | | |

|  |  |  |
| --- | --- | --- |
|  | **Yes/No** |  |
| 1. Do you have documentation that you are teaching all of the TEKS for the classes that you teach? |  | Please indicate where you document this: |
| 1. Do you involve business and industry in your program? |  | Please provide examples (i.e. guest speakers, job shadowing, mentoring, career day). |
| 1. Do you provide opportunities in your CTE programs to integrate academic and technical instruction to improve student learning? |  | Attach a lesson plan that documents an integration activity (project where you worked with academic teacher or TAKS integration). |
| 1. Have you attended the professional improvement conference for your program area? |  | If yes, attach copy of your certificate of attendance. If no, make plans to attend the conference this summer. |
| 1. Have you received training on strategies to improve student performance for special populations? |  | Please attach copy of certificate. |
| 1. Have you used these strategies to instruct special population students in your program? |  | If yes, please attach an example of a lesson plan that documents usage of these strategies. (Lesson plan may be the same one used in #4). |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 7. Please fill out tables below with your student demographics for the 2013-2014 school year: | | | | | | | |
| |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | | **CTE Student Demographics** | | | | | | | | | **A-day** | | **Class** | **# of Males** | **# of Females** | **# of CTE students** | **# of ELL** | **# of Sp. Ed.** | | ***Fall 10*** | 1st |  |  |  |  |  |  | | 2nd |  |  |  |  |  |  | | 3rd |  |  |  |  |  |  | | 4th |  |  |  |  |  |  | |  | | | | | | | | | ***Spring 11*** | 5th |  |  |  |  |  |  | | 6th |  |  |  |  |  |  | | 7th |  |  |  |  |  |  | | 8th |  |  |  |  |  |  | | | | | | | | |
| |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | | **CTE Student Demographics** | | | | | | | | | **B-day** | | **Class** | **# of Males** | **# of Females** | **# of CTE students** | **# of ELL** | **# of Sp. Ed.** | | ***Fall 10*** | 1st |  |  |  |  |  |  | | 2nd |  |  |  |  |  |  | | 3rd |  |  |  |  |  |  | | 4th |  |  |  |  |  |  | |  | | | | | | | | | ***Spring 11*** | 5th |  |  |  |  |  |  | | 6th |  |  |  |  |  |  | | 7th |  |  |  |  |  |  | | 8th |  |  |  |  |  |  | | | | | | | |
| 8. In the chart provided, fill out the information to compare your individual student demographics with your campus’s makeup of students in special populations (ELL, Special Education, Economic Disadvantaged) | | | | | |  |  |  |  | | --- | --- | --- | --- | | District Profile | | | | |  | **ELL** | **Econ. Disadv.** | **Sp. Ed.** | | Your Totals |  |  |  | | Your Campus |  |  |  | | |
|  | | **YES/NO** | | |  | |
| 9. Do you participate in the district’s articulation programs? | |  | | | Give an example of a project that you use to provide rigor to your articulated classes. | |
| 10. Are you certified to teach ATC statewide articulated courses? If so, print certificate from ATC website and attach. | |  | | | Certificate expiration date: | |
| 11. Do you register and approve your students in the CATEMA program? List number of students. | |  | | | CTE Dept. Head Initials  \_\_\_\_\_\_\_ CATEMA Program registration complete Fall 2012  \_\_\_\_\_\_\_ CATEMA Program registration complete May 2013 | |
| 12. Is your course curriculum aligned with postsecondary course curriculum to improve the rigor and effectiveness of your CTE dual credit programs? | |  | | | Attach syllabi. | |
| 13. Do you have a marketing brochure/flyer to increase public awareness of dual credit opportunities, as well as for increasing nontraditional enrollments in your programs? | |  | | | Attach flyer/brochure. | |
| 14. How do you use student performance-based data to address the needs of special populations in your classes who have not met TAKS expectations? | |  | | | Give examples. | |
| 15. Do you include the statement of nondiscrimination on publications and other materials that you distribute to students and parents? | |  | | | Attach an example | |
| 16. Is your classroom readily accessible to persons who are mobility impaired? | |  | | | If no, provide recommendations for access for mobility impaired. | |
| 17. Does your program require changing rooms, showers, or restroom facilities for your CTE students? If yes, are they comparable to those provided students of the other gender. | |  | | |  | |
| 18. Are the promotional materials used for your courses available in English and Spanish? | |  | | Attach flyer/brochure. | |
| 19. Do you participate in the Admission, Review, and Dismissal (ARD) committee process when a student who qualifies for special education services is considered for placement in your program? | |  | |  | |
| 20. Do you sponsor a Career and Technology Student Organization (CTSO)? If yes, indicate which organization. Attach student roster.  FFA BPA FBLA FCCLA TAFE HOSA DECA TSA SKILLS USA NTHS | | | | | |
| 21. If you do not sponsor a CTSO, how do you develop student leadership in your classes? | | Provide examples: | | | |
| 22. Do you teach a Work-Based Learning (WBL) program? Do you ensure that you do not enter into any arrangement with a business that discriminates on the basis of gender, race, color, national origin, or disability in recruitment, hiring, placement, assignment to work tasks, hours of employment, levels of responsibility, or in pay. | | Please explain: | | | |
| 23. Do you provide opportunities for students in your program to attain advanced industry certifications and licensures? | | If yes, please indicate certification programs that you provide: | | | |
| 24. How do you integrate labor market data and workforce trends into your programs to provide students with technical knowledge and skills essential for high skill, high wage careers. | | Please provide examples: | | | |
| 25. Does your program provide students with opportunities to enter into nontraditional training and employment? | | Please provide examples: | | | |
| 26. Are you providing a Practicum or Internship for your Juniors, Seniors or Advanced? | | If yes, list examples: | | | |
| 27. Do you have a complete, current Inventory List? | **YES/NO** | | Please attach. | | |

|  |  |
| --- | --- |
| Teacher’s Signature: | Date: |