**CAVIAT FUSD School District Binder Review Checklist**

**Program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CTED Indicator #1**

 Copy of a valid, program-appropriate Career and Technical Education (CTE) Teaching Certificate for every instructor in the program.

 Please Circle: YES NO

**CTED Indicator #2**

 Participation in the appropriate AZ CTE Technical Skills Assessment, if available. If the program does not have an appropriate AZ CTE Technical Skills Assessment, is there documentation provided?

 Please Circle: YES NO

**CTED Indicator #3**

 Course Catalog **OR** Course Syllabus OR Student Records/Class Roster **OR** Evidence indicating that a majority of instructional time is conducted in a lab environment, field-based environment, or work-based learning environment **OR** a brief written narrative explaining that the program is taught exclusively on a community college campus by appropriately certified community college instructors, if applicable.

 Please Circle: YES NO

**CTED Indicator #4**

 Evidence of student participation in a CTSO. Includes a membership roster, plus one or more of the following: CTSO Chapter Plan of Work, Schedules, Flyers, Brochures, CTSO meeting agendas/minutes, lesson plans that reflect co-curricular CTSO activities conducted within the classroom.

 Please Circle: YES NO

**CTED Indicator #5**

 Evidence demonstrating the need for extra funding should include **one** of the following:

* + ...Specialized Equipment Inventory YES NO
	+ ...List of specialized materials YES NO
	+ ...List of customized facilities YES NO
	+ ...List of costs incurred due to YES NO

work-based learning experiences

* + ...List of costs related to the convening YES NO

of CTE Advisory Boards and Committees

* + ...List of CTSO expenditures YES NO
	+ ...List of expenses related to industry YES NO

certifications

* + ...List of expenses related to teacher YES NO

professional development

* + ...List of expense related to CTE YES NO

salaries and benefits

* + evidence of student tuition (DE) YES NO N/A

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**CTED Indicator #6**

 Master Schedule OR district/school student handbook (hard copy of electronic) indicating that the program's coherent sequence of courses are offered.

 Please Circle: YES NO

**CTED Indicator #7**

 Written plan to offer industry-recognized certifications or licensures, along with a timeline for implementing the plan **OR** list of viable industry certifications and/or licensures that students can obtain prior to graduation **OR** list of identified program-embedded skills that will allow a student to obtain entry-level employment prior to receiving an Associate or Baccalaureate degree **OR** list of single or stackable credentials.

 Please Circle: YES NO

**CTED Indicator #8**

 List of business and industry CTE Advisory Board/Committee members **OR** list of work-based learning opportunities provided by business and industry **OR** list and description of business and industry contributions.

 Please Circle: YES NO

 **Yes, I find that the CAVIAT FUSD School District Binder is in compliance on this date**

 **No, I find that the CAVIAT FUSD School District Binder is NOT in compliance on this date**

**COMMENTS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**