



Agreement Statement for an Alternative Program Teaching Permit (Pathway 5)

Permit is valid only in the Nebraska School System requesting issuance.

Agreement Statement of Superintendent or Governing Board of School System

The school system intends to employ (Student Name) _____

Name and Address of School System: _____

** Signature of Superintendent or Authorized Representative

Date

Agreement Statement of Applicant

I understand that I must complete, at an approved teacher preparation program, at least 15 semester hours every 2 years towards the completion of the Alternative Program Teaching Permit. In addition, I have agreed to meet the conditions set forth in the contract for participation which is on file at the recommending teacher training institution.

Signature of Applicant

Date

Agreement Statement of Certification Officer

The following documentation is on file at the recommending teacher training institution for the above applicant.

To be completed for the first issuance of the
Alternative Program Teaching Permit

To be completed for renewal of the
Alternative Program Teaching Permit

Written plan for mentoring and
supervision

Transcript Review

Alternative Plan

Completion of Pre-Teaching Seminar

Signed Contract for Participation

Fifteen (15) semester hours for renewal

Annual Update of plan for mentoring
and supervision

Signature of Certification Officer

Date

*The requirement that a certificate or permit applicant provide his/her social security number is contained in Neb. Rev. Stat. 79-810. The uses that will be made of this number are criminal background checks prior to issuance of a certificate and for purposes of data compilation and statistics concerning employment of graduates of state approved teacher education programs and employment of certificate or permit holders.

**If employed in a non-public school, the signature of the area or diocesan superintendent is required.

EXPECTED STARTING DATE OF EMPLOYMENT: _____

Name of individual you are seeking to employ: _____

Name of School System: _____

Address: _____

Name & Title of Person Submitting Request: _____

Phone: _____ Fax: _____ Email: _____

Description of Teaching Position: _____

School Building Name(s): _____

Indicate FTE (must be at least .5 FTE teaching in eligible endorsement area): _____

This plan for mentoring and supervising the teacher must be provided *annually* – please complete the following:

- Who will be the primary mentor for the teacher at the school site? Mentor name, email, position, and building:


- When will mentoring take place and how frequently (e.g., will release time be provided, after school, other)?


- Identify any other resources the school system may utilize to assure a high-quality mentoring/induction experience.


- Describe your plan for supervising the teacher (at a minimum, the school system is responsible for evaluating the teacher in accordance with its own board policies). _____

I have read and understand the School System TCP Mentoring Plan.

Signatures:

 _____ Date: _____
School Administrator or Authorized Representative Email: _____
(If employed in a nonpublic school, the signature of the area or diocesan superintendent is required.)

 _____ Date: _____
TCP Teacher Email: _____

 _____ Date: _____
Mentor Teacher Email: _____

Fill out completely – if attaching your own form, include NDE course codes.

Courses you will be teaching at your district, not UNK courses.

Teaching Schedule for (name of teacher): _____

☐ Fall – year: _____

☐ Spring – year: _____

Time (? :00 - ? :00)	Subject Name	NDE course code

☐ Fall – year: _____

☐ Spring – year: _____

Time (? :00 - ? :00)	Subject Name	NDE course code

Please keep this EXPECTATIONS document as a reference for TCP MENTORING & SUPERVISION.

1. School Administrator

- ☐ Assigns a mentor that has a minimum of three years of teaching experience.
- ☐ Familiarizes your TCP teacher with their assigned mentor, school procedures (e.g., attendance, lunch count), expectations (e.g. lesson planning, assessment), community information.
- ☐ Provides the TCP teacher with your faculty and student handbooks.
- ☐ Checks in with the mentor teacher when possible.
- ☐ Conducts informal evaluations and formal evaluations according to your own board policy.
- ☐ Contacts the TCP Coordinator if there is a change in mentor or schedule.
- ☐ Verifies that the TCP teacher's schedule is at least .5 FTE in the endorsement area(s) in which they are seeking certification by the time they begin their final student teaching semester. **The TCP teacher will not be able to complete their student teaching requirements for Initial Certification unless they teach full-time in their endorsement area for at least one full semester or a minimum of .5 FTE in two subsequent semesters.**

2. Mentor teacher (preferably in the same building with the same teaching endorsement as the TCP teacher)

- ☐ Agrees to mentor the TCP teacher for the duration of time that they are completing their certification program (minimum of two academic years).
- ☐ Participates in a UNK-provided 30-minute video orientation for mentors of TCP teachers during the first quarter of the school year each year the teacher is in the program.
- ☐ Checks in with their mentee once every week at a minimum for the first quarter of the school year.
- ☐ Supports and guides their mentee in instructional strategies, classroom management, school resources, collaboration, etc.
- ☐ Observes their mentee and provides feedback once each semester the TCP teacher is in the program. These observations will be conducted as a part of an assignment that the teacher completes for each professional sequence course.
- ☐ Observes and evaluates a lesson plan taught by their mentee and completes a Teaching Dispositions evaluation during the TCP TE833 course semester.
- ☐ Observes and evaluates a lesson plan, evaluates a written unit plan, and completes a Summative Assessment and Teaching Dispositions evaluation (midterm and final) during their mentee's final student teaching semester.

3. UNK Supervisor

- ☐ Makes a minimum of one formal observation during each semester the teacher is in the TCP, and five formal observation during the final student teaching semester.
- ☐ Discusses lesson feedback at UNK supervisor observations.
- ☐ Checks in with the mentor and/or administration when possible.
- ☐ Prepares the mentor for the final semester responsibilities.

Support and guidance for TCP teachers from the school administrator, mentor teacher, and UNK supervisor is very important to their success. Communication is the key to any partnership. Please feel free to contact the UNK supervisor with any questions or concerns. Our mutually shared goal is to produce quality teachers!