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| **SEDseal** | **THE STATE EDUCATION DEPARTMENT** / THE UNIVERSITY OF THE STATE OF NEW YORK / ALBANY, NY 12234 |

**Application for the Registration of New Program**

**leading to the Professional Teaching Assistant Certificate**

**Important Information**

1. Use this application if you are a New York State institution of higher education, holding an absolute charter from the NYS Board of Regents or permanent authority to award degrees, requesting registration of a program leading to a **professional teaching assistant certificate.**

1. Program registration is based upon the standards found in the Regulations of the Commissioner of Education (8 NYCRR Chapter II). The Department registers individual curricula/programs rather than the institution, but the program registration process includes, in some instances, an assessment of institutional-level compliance with certain standards.

1. This application includes attestations/assurances, by the Chief Administrative or Academic Officer/Provost of the institution, on behalf of the institution, concerning the institution’s compliance with statutory and regulatory requirements related to the standards for curricula/program registration and operation of higher education programs in New York State.
2. The Department will audit compliance with the standards and, if an institution is found to be out of compliance with any of the standards to which it attested compliance, that finding may lead to denial of: (1) re-registration of the program, pursuant to §52.1(l) of the Regulations of the Commissioner of Education, and (2) the ability of the institution to utilize attestations in future applications for program registration; and may warrant deregistration of the program.
3. Program proposals from SUNY and CUNY System institutions must be submitted to the Department by the System Administration. Contact the System Administration for information concerning relevant proposal submission requirements.
4. The Department reserves the right to request additional information and/or clarification of any information provided by the institution that may be necessary for the Department to make a registration decision concerning the proposed program.

**Submission Instructions**

Applications for program registration will be accepted via email, according to the instructions below. Hard copy applications will not be accepted, reviewed or retained by the Department.

1. Create a single PDF document that includes the following documents:

* The completed Application for the Registration of New Graduate and Undergraduate Curricula/Programs in teacher education, with all required signatures included;
* A request for a Master Plan Amendment and associated information and materials that may be required concerning this program proposal (see below); and
* An external review of the proposed program when required (see below).

1. Attach the single PDF document to an e-mail.
2. Send the e-mail (with the attachment) to [OCUEedApps@nysed.gov](mailto:OCUEEdApps@nysed.gov) .
3. The subject line of the email should include the institution's name, the degree award and the program title. For example:

Subject: ABC College, M.S. Adolescence Education Biology 7-12

**Master Plan Amendments**

If this program proposal requires a Master Plan Amendment, additional information and materials related to that request will be required. Please visit the Department’s web site for information on [Master Plan Amendments](http://www.nysed.gov/college-university-evaluation/proposals-requiring-master-plan-amendment) to determine if a Master Plan Amendment is required for this program proposal and to access the Master Plan Amendment Supplement.

**External Review**

If this program proposal requires an external review, additional information and materials related to that request will be required. Please refer to the Department’s website for information about when an [external review](http://www.nysed.gov/college-university-evaluation/external-reviews) of a proposed program is required. If an external review is required, it must be submitted with the program registration application.

**General Information**

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| Institution (Legal Name) | Institution Code |
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| Proposed Program Title | [Degree/Award](http://www.nysed.gov/college-university-evaluation/education-law-rules-and-regulations) |
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| Address of Any Campus Where the Proposed Program Will Be Offered  (main and/or branch campuses) | Full-time or Part-time [[1]](#footnote-1) |
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| Program Format(s) | HEGIS Code |
| Check all program scheduling and format features that apply: (See [definitions](http://www.nysed.gov/college-university-evaluation/format-definitions))  **a)** **Format**: Day Evening Weekend Evening/Weekend  Not Full-Time  **b)** **Mode**: Standard Independent Study External Accelerated  Distance Education (to register the program in the Distance Education format submit a [distance education application](http://www.nysed.gov/college-university-evaluation/state-teacher-educational-leader-or-pupil-personnel-services-program) with this proposal)  **c) Other**: Bilingual Language Other Than English Upper Division Program | 5503.10 |
| Total Number of Credits |
|  |
| Lead Contact for Program [First Name, Last Name, Title] | Email Address |
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**Attestation and Assurances**

On behalf of the institution, I hereby attest to the following:

That all educational activities offered as part of this proposed curriculum are aligned with the institutions’ goals and objectives and meet all statutory and regulatory requirements, including but not limited to Parts 50, 52, 53 and 54 of the Regulations of the Commissioner of Education and the following specific requirements:

That credit for study in the proposed program will be granted consistent with the requirements in §50.1(o).

That, consistent with §52.1(b)(3), a reviewing system has been devised to estimate the success of students and faculty in achieving the goals and objectives of the program, including the use of data to inform program improvements.[[2]](#footnote-2)

That, consistent with §52.2(a), the institution possesses the financial resources necessary to accomplish its mission and the purposes of each registered program, provides classrooms and other necessary facilities and equipment as described in §52.2(a)(2) and (3), sufficient for the programs dependent on their use, and provides libraries and library resources and maintains collections sufficient to support the institution and each registered curriculum as provided in §52.2(a)(4), including for the program proposed in this application.

That, consistent with 52.2(b), the information provided in this application demonstrates that the institution is in compliance with the requirements of §52.2(b) and §52.21(b)(2)(i) and (ii) relating to faculty, including those pertaining to field experiences, student teaching and mentoring teacher of record.[[3]](#footnote-3)

That all curriculum and courses are offered, and all credits are awarded, consistent with the requirements of §52.2(c).

That admissions decisions are made consistent with the requirements of §52.2(d)(1) and (2).

That, consistent with §52.2(e), overall educational policy and its implementation are the responsibility of the institution’s faculty and academic officers, that the institution establishes, publishes and enforces explicit policies as required by §52.2(e)(3), that academic policies applicable to each course as required by §52.2(e)(4), including learning objectives and methods of assessing student achievement, are made explicit by the instructor at the beginning of each term; that the institution provides academic advice to students as required by §52.2(e)(5), and, that the institution maintains and provides student records as required by §52.2(e)(6).

That, consistent with §52.2(f)(2), the institution provides adequate academic support services and that all educational activities offered as part of a registered curriculum meet the requirements established by state statute, the Rules of the Board of Regents and the Commissioner’s regulations.

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| CHIEF ADMINISTRATIVE or ACADEMIC OFFICER/ PROVOST | |
| **CEO** (or designee) **approval**  *Signature affirms the institution’s commitment to support the proposed program.* | Name and title:  Signature and date: |
| **If the program will be registered jointly with another institution, provide the following information:** |
| Partner institution’s name:  Name and title of partner institution’s CEO:  Signature of partner institution’s CEO: |

**Program Description, Objectives and Targets**

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| **Program Description & Objectives**  Provide the program description as it will appear in the institution’s catalog and on the institution’s webpage. | | | | | | | |
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| **College Recommendation Requirement**  Institutions shall submit a college recommendation in TEACH for the Pre-Professional level Teaching Assistant certificate upon a candidate’s enrollment in the program. Programs shall notify the Department if the candidate exits the program before the expiration date of such certificate. Lastly, upon successful completion of the program requirements, institutions shall submit a college recommendation in TEACH for the Professional level Teaching Assistant certificate.  By including the name, title, and email of the individual responsible for providing the college recommendation, you acknowledge and confirm your understanding of these requirements. | | | | | | | |
| |  |  | | --- | --- | | Contact Name [First Name, Last Name, Title] | Email Address | |  |  | | | | | | | | |
| **For Certificate Programs** *List all associated registered degree programs to which credit will apply. Include program Title, Degree and Code* | | | | | | ***Reminder***: All courses in certificate programs must be applicable to one or more registered degree programs at corresponding locations. | |
| Title | | Degree | | | Code | | |
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| **Program Targets -** Department Expectation: Establish realistic enrollment, retention, graduation, and job placement targets for this program that are connected to the reviewing system by which the success of students and faculty in achieving such goals and objectives of the program are determined. Note: Program targets are not required for the registration of curricula. However, the Department expects institutions to establish targets that reflect the espoused quality of the program, and to review such targets periodically and systematically as they relate to program implementation. | | | | | | | |
| Enrollment Projections  The Department assumes that Year 5 enrollment projections will be full-capacity relative to existing and added resources planned. | | | | | | | |
| Year 1 | Year 2 | | Year 3 | Year 4 | | | Year 5 |
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**Curriculum and Course Information – Undergraduate Program Schedule**

*Complete the relevant Program Schedule in a manner consistent with §52.2(c) of the Regulations of the Commissioner*

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| * *Indicate academic calendar type****:*** *Semester*  *Quarter* *Trimester* *Other (describe):* * *Label each term in sequence, consistent with the institution’s academic calendar (e.g., Fall 1, Spring 1, Fall 2)* | | | | | | | | | | | | | | | | |
| Term: | | | Credits per classification | | | | |  | Term: | | | Credits per classification | | | | |
| Course Number & Title | | Cr | LAS | Maj | New | | Prerequisite(s) | Course Number & Title | | Cr | LAS | | Maj | New | Prerequisite(s) |
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| **Term credit total:** | |  |  |  |  | | | **Term credit total:** | |  |  | |  |  | |
| Term: | | | Credits per classification | | | | | Term: | | | Credits per classification | | | | |
| Course Number & Title | | Cr | LAS | Maj | New | | Prerequisite(s) | Course Number & Title | | Cr | LAS | | Maj | New | Prerequisite(s) |
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| Term: | | | Credits per classification | | | | | Term: | | | Credits per classification | | | | |
| Course Number & Title | | Cr | LAS | Maj | New | | Prerequisite(s) | Course Number & Title | | Cr | LAS | | Maj | New | Prerequisite(s) |
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| **Term credit total:** | |  |  |  |  | | | **Term credit total:** | |  |  | |  |  | |
| Term: | | | Credits per classification | | | | | Term: | | | Credits per classification | | | | |
| Course Number & Title | | Cr | LAS | Maj | New | | Prerequisite(s) | Course Number & Title | | Cr | LAS | | Maj | New | Prerequisite(s) |
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| **Term credit total:** | |  |  |  |  | | | **Term credit total:** | |  |  | |  |  | |
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| **Program Totals**: | Credits: | | | | | Liberal Arts & Sciences: | | | | Major: | | | Elective & Other: | | | |

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| **Program Admission Requirements**  Programs shall require candidates to hold a high school diploma or equivalent. List all program admission criteria and provide a sample of the documentation the institution uses to verify these requirements are met. |
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| **Articulation Agreements**  To demonstrate careful program planning and to clarify potential pathways for graduates into programs leading to classroom teaching certification, please provide documentation of any relevant articulation or transfer agreements.   * If the proposed program articulates into an existing program at your institution, include a copy of the agreement. * If your institution does not offer a registered program leading to a classroom teaching certificate, identify any external institutions with which you have articulation agreements for this proposed program, and include copies of those agreements.   Draft agreements are acceptable. |
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**Program Requirements: Coursework & Faculty**

* In the chart below, identify all pedagogical and non-pedagogical courses proposed to be required in the program (including electives). Identify the new courses, list each course number and title, and provide a description of each course for this program as it appears or will appear in the college catalog. Each course listed in the table must have a course description which reflects alignment with the regulatory requirements.
* If new courses have been developed as part of the proposed program’s curriculum, course syllabi for all new courses must be submitted with this application. Syllabi for each new course must be saved, not scanned, as a PDF document and added as an addendum to this application.

**Pedagogical Coursework**

At least 9.0 semester hours must be in one or more of the following areas:

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| (a) human development and learning, including but not limited to the impact of culture, heritage, socioeconomic level and factors in the home, school and community that may affect a student’s readiness to learn; | | |
| Course Number and Title  (Use an [\*] to indicate a new course.) | Course Description | Faculty Member Name(s)/Title/Earned Degrees & Discipline/Additional Related Qualifications |
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| (b) teaching students with disabilities and special health-care needs to develop the skills necessary to provide specially designed instruction to students with disabilities to participate and progress in the general education curriculum; | | |
| Course Number and Title  (Use an [\*] to indicate a new course.) | Course Description | Faculty Member Name(s)/Title/Earned Degrees & Discipline/Additional Related Qualifications |
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| (c) teaching literacy skills; | | |
| Course Number and Title  (Use an [\*] to indicate a new course.) | Course Description | Faculty Member Name(s)/Title/Earned Degrees & Discipline/Additional Related Qualifications |
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| (d) curriculum, instruction, and assessment, including instructional technology; | | |
| Course Number and Title  (Use an [\*] to indicate a new course.) | Course Description | Faculty Member Name(s)/Title/Earned Degrees & Discipline/Additional Related Qualifications |
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| (e) foundations of education (historical, philosophical, sociological and/or legal); | | |
| Course Number and Title  (Use an [\*] to indicate a new course.) | Course Description | Faculty Member Name(s)/Title/Earned Degrees & Discipline/Additional Related Qualifications |
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**Content Coursework**

If the above pedagogical coursework includes fewer than 18.0 credits, the program must include content coursework in English language arts, mathematics, science, and/or social studies. The pedagogical coursework and the content coursework must add up to no less than 18.0 semester hours total. For those courses below, the course description MUST identify the subject area (i.e., English language arts, mathematics, science, and/or social studies).

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| Coursework in English language arts, mathematics, science, and/or social studies. | | |
| Course Number and Title  (Use an [\*] to indicate a new course.) | Course Description (including subject area) | Faculty Member Name(s)/Title/Earned Degrees & Discipline/Additional Related Qualifications |
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**Additional Coursework Required of the Program**

For any courses not listed above, but required to complete the proposed program, please provide the information requested below (includes electives).

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| Course Number and Title  (Use an [\*] to indicate a new course.) | Course Description | Faculty Member Name(s)/Title/Earned Degrees & Discipline/Additional Related Qualifications |
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**Faculty Program Director**

Please list the faculty member(s) to be responsible as Program Director. If not included above, please indicate earned degrees, discipline, and additional related qualifications.

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1. Please refer to §52.2(c) and §145-2.1 of the Regulations of the Commissioner for definitions and information about full and part time study. Only programs meeting the definition of full-time under §145-2.1 can be registered as eligible for financial aid under NYS’s Tuition Assistance Program (TAP). Programs are subject to audit by the NYS Office of the State Comptroller and the Higher Education Services Corporation (HESC) for financial aid compliance purposes. [↑](#footnote-ref-1)
2. The Department reserves the right to request these data at any time and to use such data as part of its evaluation of future program registration applications submitted by the institution. [↑](#footnote-ref-2)
3. Please review all the requirements concerning faculty for teacher education programs found in §52.21(b)(2) to ensure compliance. [↑](#footnote-ref-3)