

VIRGINIA DEPARTMENT OF EDUCATION
APPLICATION FOR NEW CAREER AND TECHNICAL EDUCATION PROGRAM/COURSE

SCHOOL DIVISION: _____ **Date:** _____

DIRECTIONS/PROCEDURES

1. Prior to implementing a new CTE program/course, submit an application, along with items "F." Fax to 804-530-4560 or e-mail to CTE@doe.virginia.gov.
2. Complete a separate application for each new program/course.
3. Contact the CTE program specialist for assistance as needed.

I. CONTENT AREA

- Agricultural Education
- Business & Information Technology
- Health and Medical Sciences
- Marketing
- Family & Consumer Sciences
- Technology Education
- Trade and Industrial Education
- Career Connections
- Military Science (all Military Branches)
- Other (specify) _____

II. PROGRAM/COURSE INFORMATION (Use state title and course code.)

A. Program/Course identification:

Title _____ Course Code _____

(NOTE: Use program/course title and code as it appears in the CTERS User's Manual at:

http://www.doe.virginia.gov/info_management/data_collection/instruction/career_tech/cters/users_manual.pdf

Length of course _____ Grade level(s) to be served _____

School(s)/facility where offered _____

Date of implementation _____

B. Person responsible for administering the program:

Name Title

Phone E-mail Address

C. Will teacher have the correct endorsement for the program/course?

- Yes _____ Endorsement Code
 No

NOTE: If no, contact VDOE program area specialist before proceeding to complete application.

D. Will the course follow the guidelines in the *CTE Administrative Planning Guide (APG)* at <http://www.cteresource.org/apg/>? **If no, describe changes/additions.**

- Yes No

E. **Please note**, Competency Based Education (CBE) is a requirement. Will you use the state course outlines and/or recommended competencies for this program/course? **If no, describe modifications.**

- Yes No

F. Data on student interest for this program/course must be provided. **(This should be a survey of students in grades 7 through 11 administered within the prior twelve month period. The survey may also include grade 6. (NOTE: Submit a blank survey form and detailed summary report of students' survey responses with this application.)**

G. A concentration is a coherent sequence of state-approved courses (equivalent to two 36-week credit courses as listed in the [APG](#)) in a specific career cluster and career pathway. If this is a middle school course, please proceed to item H.

G.1. Reference the concentration sequence identified in the APG for the requested course. Which course(s) in the concentration sequence do you currently offer? List the state course code(s) below:

_____/_____/_____

G.2. If you do not currently offer any courses in the concentration sequence, please indicate the school year the additional course(s) will be offered to complete the concentration sequence.

Implementation Year _____, Course Number _____

Implementation Year _____, Course Number _____

Implementation Year _____, Course Number _____

H. Labor market/employment needs data:

H.1. In order to complete the Labor Market/Employment Data table, download the Excel file of employment information for your local Workforce Investment Area (LWIA) available at <http://ctetrailblazers.org/labor-market-data/> to complete columns 2, 3, 4, 6, 7 and data at the United States Department of Labor, Bureau of Labor Statistics, at <http://data.bls.gov/projections/occupationProj> to complete column 5. Please supply the following information for up to 5 occupations related to the proposed course. Consider a variety of occupations across multiple clusters or pathways. Also, consider other occupations related to identified courses in the concentration sequence.

Labor Market/Employment Data

Columns: 1	2	3	4	5	6	7
Local Workforce Investment Area (LWIA)	Most recent 10-year projection percent for rate of employment growth for the occupation (LWIA)	Most recent 10-year projection for number of new jobs for the occupation (LWIA)	Most recent 10-year projection percent for rate of employment growth for the occupation (Commonwealth)	Most recent 10-year projection percent for rate of employment growth for the occupation (National)	Most recent 10-year projection percent for rate of employment growth across all occupations (LWIA)	Most recent 10-year projection percent for rate of employment growth across all occupations (Commonwealth)
LWIA Area:						
Occupation:						
Pathway:						
Occupation:						
Pathway:						
Occupation:						
Pathway:						
Occupation:						
Pathway:						
Occupation:						
Pathway:						
Occupation:						
Pathway:						

H.2. Address the following questions in order to justify why this course should be approved.

a. Does the projected rate of growth for the occupation(s) you have identified exceed the rate of growth for all occupations in your LWIA? (compare column 2 to column 6 in your LWIA)

Yes

No

Occupations	Data from Column 2 in table H.1	Data from Column 6 in table H.1	Difference (Column 2 - Column 6)

b. Does the projected rate of growth for the occupations you have identified exceed the rate of employment growth for all occupations in the Commonwealth? (compare column 2 to column 7)

Yes

No

Occupations	Data from Column 2 in table H.1	Data from Column 7 in table H.1	Difference (Column 2 - Column 7)

c. Sometimes, a low rate of growth may still amount to a reasonably large number of jobs. Do you see evidence for a large volume of new jobs supported by this course (reference column 3 on the Labor Market/Employment Data table)?

Yes

No

d. Divisions prepare students for state and national competitiveness. Do the growth rates found in columns 4 or 5 on the Labor Market/Employment Data table demonstrate that the careers supported by the course are expected to see rapid growth at the state or national level?

Yes

No

e. Is there evidence that new industry openings in your area will hire for the skills taught in the proposed course? Use <http://vedpweb.yesvirginia.org/announcements#/NewExpanding> to determine any relevant industry openings in your area, and/or provide an example of a local or statewide announcement for related projects or business growth in your area.

The school division assures that the program/course will operate consistently with the requirements of current Career and Technical Education Regulations and Virginia Standards of Quality.

Division CTE Director (Signature)

Date

Division Superintendent (Signature)

Date

FOR STATE USE ONLY

This application for a new program/course is approved consistent with the requirements of the Career and Technical Education State Regulations, Standards of Accreditation, and Standards of Quality.

REVIEWED BY: _____
Program Specialist (Signature)

Date

APPROVED BY: _____
State Director/Designee (Signature)

Date