

STATE-APPROVED TEACHER EDUCATION PROGRAM ANNUAL REPORT 2022

Directions:

- Email Report in **both** Word and PDF formats to felicia.villalobos@hawaii.gov by September 30, 2022.
- Direct your questions to the above email address or by telephone at 808-586-2602.

Section I. – EPP Profile

Provider Name:	
Address:	
One Main Contact Person:	
Website for listing on HTSB site:	
Official contact person for HTSB communication:	
Name:	
Position:	
Phone:	
Email:	

Section II. – Students and Program Completers for 2021-2022

Traditional Program(s) List each teacher education program including approved licensure fields.			
Degree and/or Licensure Program	Licensure Area (Fields and grade levels)	Number of Enrolled Candidates (Enrolled in the current academic year July 1 st - June 30 th)	Number of Completers (in most recently completed academic year July 1 st -June 30 th)
Totals for Traditional Programs			
Alternative Program(s) List each teacher education program including approved licensure fields			

Totals for Alternative Programs			
<i>Licensure Only Programs (include added field(s))</i>			
Totals for Licensure Only Programs			
Advanced Programs (Do not include those completers counted above)			
School Counselor	School Counselor K-12		
School Librarian	School Librarian K-12		
Teacher Leader	Teacher Leader K-12		
Total for Advanced programs			
Enrollment and completion TOTALS for all programs			
Unduplicated¹ total of all program candidates and completers			

Added or Discontinued Programs

¹ *Unduplicated* refers to a total number of unique candidates or completers. Individuals who are working toward or earned more than one credential may appear in multiple rows above but should be counted only once here.

Any programs that have been added or discontinued within the past year are listed below.

Added Programs	Discontinued Programs

Section III – Substantive Changes

Have any of the following substantive changes occurred during the 2020-2021 academic year? If not, insert “none” after the question.

(A) Any changes in the published mission or objectives of the organization/institution or EPP?

Explanation if “Yes”

(B) Any added courses or programs that represent a significant departure, in terms of either content or delivery, from those that were approved by the Board?

Explanation if “Yes”

(C) Any change(s) in contract(s) with other providers for direct instructional services, including teach-out agreements (e.g. A teach-out agreement is a written agreement between accredited institutions that provide for the equitable treatment of students if one of those institutions stops offering an educational program before all students enrolled complete the program)?

Explanation if “Yes”

(D) Any change(s) that mean the EPP no longer satisfies approval standards or requirements?

Explanation if changed

(E) Any change(s) in institutional accreditation status?

Explanation if changed

(F) Any change in the legal status, form of control, or ownership of the EPP?

Section IV. – Required Information

1. Describe the evidence that is collected from candidates demonstrating that they can apply the standards described HTSB’s Code of Ethics.

2. Describe any mentoring support provided to your candidates after program completion.

3. Describe training provided to mentor/cooperating teachers before pairing them with candidates and during the student teaching/Internship.

4. Describe the process used when a teacher candidate no longer shows the potential to be recommended for licensure.

Section V. – New Evidence for Meeting Hawaii Specific Requirements

Directions: Provide any *new* evidence since your last annual report that ensures your EPP is meeting the following requirements stated in HAR 8-54-19 “Approval of Preparation Programs:”

1. Evidence candidates meet the Hawai'i teacher performance standards.

2. Evidence candidates are prepared to incorporate the following areas into their practice:

A. Hawaiian language, history and culture;

B. Student standards adopted by the Department;

C. Teaching of reading including working with students of reading difficulties;

[Empty box]

D. Working effectively with students with disabilities, including training related to participation as a member of individualized education program teams;

[Empty box]

E. Working effectively with students who are limited English proficient;

[Empty box]

F. Working with gifted and talented students;

[Empty box]

G. Integrating technology effectively into curricula and instruction, including activities consistent with the principals of universal design for learning and the use of technology to effectively collect, manage and analyze data to improve teaching and learning for the purpose of increasing student academic achievement.

[Empty box]

3. Evidence that candidates meet the standards from a national organization approved by the board for the license fields offered in the program or, for license fields without national standards, the standards approved for the field

[Empty box]

4. Any change in your candidates' clinical experience using one or more of the following requirements:

- A. A minimum of four hundred fifty (450) hours of supervised clinical experience in student teaching, internship or residency; OR
- B. Demonstration of teaching proficiency through a combination of documented satisfactory work experience and observation by the EPP; OR
- C. Passing a board approved performance assessment normed for Hawaii in combination with any other requirements determined by the EPP.

[Empty box]

Section VI. Self-Assessment and Continuous Growth and Improvement

[Empty box]

Section VII. – Optional Information: Notes on Progress, Accomplishment, and Innovation

1. Use this space to provide any other information you wish to share with HTSB, such as successes of your program, faculty, staff or candidates, experienced since your last annual report.

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Section VIII. – Areas for Improvement or Conditions

Since your last annual report, summarize activities the EPP has engaged in and report on the outcomes of those activities as they relate to correcting areas of improvement or conditions cited in the current accreditation or SATEP approval report, if applicable.

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Section IX – State Approval Pathway

Check the pathway you will use/are using to achieve continuing unit state approval:

	Association for Advancing Quality in Educator Preparation (AAQEP)
	Council for Accreditation of Educator Preparation (CAEP)
	Masters in Psychology and Counseling Accreditation Council (MPCAC)
	Montessori Accreditation Council for Teacher Education (MACTE)
	World Indigenous National Higher Education Consortium (WINHEC)
	State Review with out-of-state reviewers; HTSB review fees will apply
	List any other specialty organization that will review other programs in your unit, ex., NCTM, ALA:

Section X – Student Loan Default Rate

HTSB is required to request student loan default rates and other consumer information. Report consumer information for the educator preparation provider (Hawai'i Revised Statute §302A-807). Check all that Apply. If unknown, write in "unknown."

Consumer Information	Access to Data	No Access to Data	Publicly Displayed Data - <i>Insert Link</i>

OPE ID (Office of Post-Secondary Education Number)	
EPP Default Rate	

Section XI – VERIFICATION of REPORT

Report Preparer's Information

Name: _____
 Position: _____
 Telephone: _____
 Email: _____

I verify that the contents of this report are complete and accurate.

 Signature

 Date