

**HAWAI'I TEACHER STANDARDS BOARD LICENSE RENEWAL FOR SCHOOL COUNSELORS
VERIFICATION OF SATISFYING THE HAWAI'I SCHOOL COUNSELOR PERFORMANCE STANDARDS DOCUMENTATION**

Name _____ Social Security Number XXX-XX-_____ Date of Birth ____/____/____

This form is to be used to document that you meet all ten of the Hawai'i School Counselor Performance Standards. Complete this form and **have in your possession all relevant documentation before** you answer SECTION 4 of the APPLICATION FOR RENEWAL OF HAWAI'I TEACHING LICENSE. This document can be uploaded into your HTSB account page by logging into your account, clicking the "Attachments" tab, and then uploading your PDF document.

Retain this completed form. The HTSB will randomly audit license renewals annually and in the event you are selected to be audited, you will be required to submit your completed form and the documentation that verifies your completion of the professional growth activities. This document can be uploaded into your HTSB account page by logging into your account, clicking the "Attachments" tab, and then uploading your PDF document

- The Hawai'i School Counselor Performance Standards are listed in the following table in column one.
- The second column lists examples of professional growth activities that could be used to meet the Hawai'i School Counselors Performance Standards provided the activity links with the licensee's subject matter field. An activity may be used to meet multiple Counselor Performance Standards provided the verification documentation will support such applicability.
- The third column provides examples of documentation that can be used for meeting the standard. When submitting documentation you must identify it by checking the box in the "Documentation" section.

STATEMENT OF AFFIRMATION: Sign your name in blue ink.

I certify that the information contained in this form is true and accurate. I understand that misrepresentation or falsification is grounds for the Hawaii Teacher Standards Board to deem me in non-compliance with meeting renewal requirements, that my license status may change and that the Board may impose other disciplinary sanction. This form should be signed and dated prior to submitting your license renewal application.

SIGNATURE OF LICENSEE _____ **DATE** _____

Hawai'i Performance Standards for School Counselors

ALL STANDARDS	The Following Activities Meet All Standards	DOCUMENTATION
The following activity meets all ten performance standards	The most recent counselor evaluation and professional development plan from the licensee's employing educational institution with a satisfactory rating in all areas if the evaluation instrument and professional development plan aligns with all ten Hawai'i Performance Standards for Counselors.	Hawai'i Department of Education Counselors <ul style="list-style-type: none"> <input type="checkbox"/> The most recent counselor evaluation (EES) Charter School and Private School Counselors <ul style="list-style-type: none"> <input type="checkbox"/> Copy of the most recent evaluation signed by the principal if it aligns with all ten Hawai'i Performance Standards for Counselors. AND <input type="checkbox"/> Verification from the principal or supervisor indicating that the evaluation continues to be satisfactory (4010)
The following activity meets all ten performance standards	National Board Certification.	<ul style="list-style-type: none"> <input type="checkbox"/> An official NBPTS document dated on or before the licensure expiration date providing the official document is the subject area of the licensee's current license field. OR <input type="checkbox"/> Online verification from NBPTS official website.
	The Following Activities Meet Each Standard Individually	

STANDARD 1	PROFESSIONAL ACTIVITIES	DOCUMENTATION
The professional school counselor plans, organizes and delivers the school counseling program.	Suggested Activity 1a Participate in professional development activities such as courses, workshops, conferences, seminars, symposia, and in service training relating to counseling programs.	Evidence for Suggested Activity 1a <ul style="list-style-type: none"> <input type="checkbox"/> Evidence of participation in professional development activity OR <input type="checkbox"/> Document verifying service as a facilitator OR <input type="checkbox"/> Assignment or reflection paper.

	<p>Suggested Activity 1b</p> <p>Read professional materials that include counseling programs/strategies.</p>	<p>Evidence for Suggested Activity 1b</p> <ul style="list-style-type: none"> <input type="checkbox"/> Written reports or journals describing knowledge gained through this reading and how it might be used OR <input type="checkbox"/> Reflections
	<p>Suggested Activity 1c</p> <p>Collaborative work with school faculty to support and enhance learning for all students.</p>	<p>Evidence for Suggested Activity 1c</p> <ul style="list-style-type: none"> <input type="checkbox"/> Meeting notes written by either teacher or counselor OR <input type="checkbox"/> Individual student or classroom plan curriculum maps
	<p>Suggested Activity 1d</p> <p>Implement a counseling program that will have a positive effect on student learning</p>	<p>Evidence for Suggested Activity 1d</p> <ul style="list-style-type: none"> <input type="checkbox"/> Counseling plans OR <input type="checkbox"/> Unit and lesson plans OR <input type="checkbox"/> Schedules OR <input type="checkbox"/> Data to show increased student learning
STANDARD 2	PROFESSIONAL ACTIVITIES	DOCUMENTATION
<p>The professional school counselor is able to implement a school guidance curriculum through the use of effective instructional skills and careful planning of structured group sessions.</p>	<p>Suggested Activity 2a</p> <p>Develop and implement school guidance lessons/units around state wide General Learner Outcomes. Work with students using existing guidance curriculums.</p>	<p>Evidence for Suggested Activity 2a</p> <ul style="list-style-type: none"> <input type="checkbox"/> Unit and lesson plans OR <input type="checkbox"/> Student work samples OR <input type="checkbox"/> Data to show increased student learning

	<p>Suggested Activity 2b</p> <p>Provide instructional involvement in students' academic achievement.</p>	<p>Evidence for Suggested Activity 2b</p> <ul style="list-style-type: none"> <input type="checkbox"/> Student learning goals OR <input type="checkbox"/> Modes and examples of assessments that were used OR <input type="checkbox"/> Samples of student work OR <input type="checkbox"/> Compilation and analysis of student achievement of learning goals
	<p>Suggested Activity 2c</p> <p>Develop a tool chest with best practices, instructional strategies, accommodations, etc.</p>	<p>Evidence for Suggested Activity 2c</p> <ul style="list-style-type: none"> <input type="checkbox"/> Tool chest charts OR <input type="checkbox"/> Strategies and examples of how they were used OR <input type="checkbox"/> Accommodations and examples of their use
	<p>Suggested Activity 2d</p> <p>Collaborate with teachers to ensure effective implementation of school guidance curriculum.</p>	<p>Evidence for Suggested Activity 2d</p> <ul style="list-style-type: none"> <input type="checkbox"/> Electronic Comprehensive Student Support System (ECSSS) reports OR <input type="checkbox"/> Student referrals OR <input type="checkbox"/> Schedules of sessions OR <input type="checkbox"/> Session activities with samples of student work

STANDARD 3	PROFESSIONAL ACTIVITIES	DOCUMENTATION
<p>The professional school counselor implements the individual planning component by guiding individuals and groups of students and their parents or guardians through the development of educational and career plans.</p>	<p>Suggested Activity 3a</p> <p>Conduct sessions with students and coordinate ongoing systemic activities designed to assist the students in establishing personal goals and developing future plans.</p>	<p>Evidence for Suggested Activity 3a</p> <ul style="list-style-type: none"> <input type="checkbox"/> Unit and lesson plans with activities OR <input type="checkbox"/> Student work samples OR <input type="checkbox"/> Student Growth Plan OR <input type="checkbox"/> Evidence of conducting student workshops such as Career Day
	<p>Suggested Activity 3b</p> <p>Conduct workshops and informational sessions for parents or guardians to address the educational and career needs of students.</p>	<p>Evidence for Suggested Activity 3b</p> <ul style="list-style-type: none"> <input type="checkbox"/> Evidence of presenting at events such as Parent Night or Career Day OR <input type="checkbox"/> Power point used at presentation
	<p>Suggested Activity 3c</p> <p>Collaborate with the IEP team to develop and implement career, educational and behavioral goals for students with special needs.</p>	<p>Evidence for Suggested Activity 3c</p> <ul style="list-style-type: none"> <input type="checkbox"/> Individualized Education Program OR <input type="checkbox"/> Explanation how data led to the established goals
STANDARD 4	PROFESSIONAL ACTIVITIES	DOCUMENTATION
<p>The professional school counselor provides responsive services through the effective use of individual and small- group counseling, consultation and referral skills</p>	<p>Suggested Activity 4a</p> <p>Document and implement the counselor roles and responsibilities for the school.</p>	<p>Evidence for Suggested Activity 4a</p> <ul style="list-style-type: none"> <input type="checkbox"/> Counselor roles and responsibilities OR <input type="checkbox"/> Implementation plan OR <input type="checkbox"/> Daily diaries OR <input type="checkbox"/> Calendars

	<p>Suggested Activity 4b</p> <p>Implement counseling sessions with a small group of students with identified needs and concerns.</p>	<p>Evidence for Suggested Activity 4b</p> <ul style="list-style-type: none"> <input type="checkbox"/> Unit and lesson plans with activities OR <input type="checkbox"/> Student work samples OR <input type="checkbox"/> Outcomes of the group sessions.
	<p>Suggested Activity 4c</p> <p>Implement prevention and/or intervention activities to meet students' immediate and future needs.</p>	<p>Evidence for Suggested Activity 4c</p> <ul style="list-style-type: none"> <input type="checkbox"/> Develop an effective referral process. OR <input type="checkbox"/> Written procedures to be used in crisis situations OR <input type="checkbox"/> Referrals to other school support services or community resources
	<p>Suggested Activity 4d</p> <p>Consult with parents /guardians, teachers, other educators and professionals from community agencies regarding strategies to help students and families.</p>	<p>Evidence for Suggested Activity 4d</p> <ul style="list-style-type: none"> <input type="checkbox"/> Record of contacts OR <input type="checkbox"/> Written plans for parents/students OR <input type="checkbox"/> Outcome of meetings
	<p>Suggested Activity 4e</p> <p>Provide prevention, intervention, and follow- up to students and families facing emergency situations.</p>	<p>Evidence for Suggested Activity 4e</p> <ul style="list-style-type: none"> <input type="checkbox"/> Intervention Plans OR <input type="checkbox"/> Results of plans

STANDARD 5	PROFESSIONAL ACTIVITIES	DOCUMENTATION
<p>The professional school counselor provides system support through effective school counseling program management and support for other educational programs.</p>	<p>Suggested Activity 5a</p> <p>Collaborate with staff to provide a comprehensive and balanced school counseling program that address student needs and educational goals.</p>	<p>Evidence for Suggested Activity 5a</p> <ul style="list-style-type: none"> <input type="checkbox"/> Meeting minutes OR <input type="checkbox"/> Documents that were completed OR <input type="checkbox"/> Results of the implementation
	<p>Suggested Activity 5b</p> <p>Participate and support other school programs or teams.</p>	<p>Evidence for Suggested Activity 5b</p> <ul style="list-style-type: none"> <input type="checkbox"/> Meeting Minutes OR <input type="checkbox"/> Individualized Education Program OR <input type="checkbox"/> Functional behavioral assessment plans OR <input type="checkbox"/> Modification Plans
	<p>Suggested Activity 5c</p> <p>Develop and implement a yearly calendar which identifies counseling activities and programs to keep students, parents/guardians, teachers, administrators, and community stakeholders informed.</p>	<p>Evidence for Suggested Activity 5c</p> <ul style="list-style-type: none"> <input type="checkbox"/> Yearly Calendars OR <input type="checkbox"/> Evidence of planned activities and results
	<p>Suggested Activity 5d</p> <p>Serve as an active participant on school or community committees and advisory councils.</p>	<p>Evidence for Suggested Activity 5d</p> <ul style="list-style-type: none"> <input type="checkbox"/> Meeting notes OR <input type="checkbox"/> Evidence of planned activities and results OR <input type="checkbox"/> Power point presentation or other verification of your presentation.

STANDARD 6	PROFESSIONAL ACTIVITIES	DOCUMENTATION
<p>The professional school counselor discusses the counseling department management system and the program action plans with the school administrator.</p>	<p>Suggested Activity 6a</p> <p>Develop and implement a counseling action plan.</p>	<p>Evidence for Suggested Activity 6a</p> <ul style="list-style-type: none"> <input type="checkbox"/> Copy of Counseling Plans OR <input type="checkbox"/> List of yearly goals
	<p>Suggested Activity 6b</p> <p>Collaborate with staff to provide a comprehensive and balanced school counseling program that address student needs and educational goals.</p>	<p>Evidence for Suggested Activity 6b</p> <ul style="list-style-type: none"> <input type="checkbox"/> Meeting minutes OR <input type="checkbox"/> Documents that were completed OR <input type="checkbox"/> Results of the implementation
	<p>Suggested Activity 6c</p> <p>Develop and implement a yearly calendar which identifies counseling activities and programs to keep students, parents/guardians, teachers, administrators, and community stakeholders informed.</p>	<p>Evidence for Suggested Activity 6c</p> <ul style="list-style-type: none"> <input type="checkbox"/> Yearly Calendar OR <input type="checkbox"/> Evidence of planned activities and results OR <input type="checkbox"/> Evidence of input obtained from staff, administrators, and other stakeholders
	<p>Suggested Activity 6d</p> <p>Set up an advisory council to review the counseling program goals, indicators and results.</p>	<p>Evidence for Suggested Activity 6d</p> <ul style="list-style-type: none"> <input type="checkbox"/> Meeting minutes OR <input type="checkbox"/> Documents that were completed OR <input type="checkbox"/> Results of the implementation

STANDARD 7	PROFESSIONAL ACTIVITIES	DOCUMENTATION
<p>The professional school counselor collects and analyzes data to guide program direction and emphasis.</p>	<p>Suggested Activity 7a</p> <p>Use student achievement data to make decisions regarding student choice of classes, special programs or other academic program planning.</p>	<p>Evidence for Suggested Activity 7a</p> <ul style="list-style-type: none"> <input type="checkbox"/> Meeting minutes OR <input type="checkbox"/> Student plans OR <input type="checkbox"/> Individualized Education Program OR <input type="checkbox"/> Report on how data helped establish the plans
	<p>Suggested Activity 7b</p> <p>Collect, analyze and interpret relevant data, to establish goals and activities to support academic achievement.</p>	<p>Evidence for Suggested Activity 7b</p> <ul style="list-style-type: none"> <input type="checkbox"/> Summary of analyzed data OR <input type="checkbox"/> Established goals OR <input type="checkbox"/> Documents showing activities that were used to support achievement.
	<p>Suggested Activity 7c</p> <p>Communicate assessment criteria and standards to teachers, students and parents.</p>	<p>Evidence for Suggested Activity 7c</p> <ul style="list-style-type: none"> <input type="checkbox"/> Meeting minutes OR <input type="checkbox"/> Faculty agenda with presentation OR <input type="checkbox"/> Individualized Education Program meeting notes
	<p>Suggested Activity 7d</p> <p>Based on data, collaborate with teachers to present lessons to small and large groups of students.</p>	<p>Evidence for Suggested Activity 7d</p> <ul style="list-style-type: none"> <input type="checkbox"/> Unit and lesson plans with activities OR <input type="checkbox"/> Student work samples OR <input type="checkbox"/> Outcomes of the group sessions.

STANDARD 8	PROFESSIONAL ACTIVITIES	DOCUMENTATION
<p>The professional school counselor monitors the students on a regular basis as they progress in school.</p>	<p>Suggested Activity 8a</p> <p>Implement a monitoring system appropriate to the school.</p>	<p>Evidence for Suggested Activity 8a</p> <ul style="list-style-type: none"> <input type="checkbox"/> Report on how monitoring system will work OR <input type="checkbox"/> Results of monitoring system
	<p>Suggested Activity 8b</p> <p>Use school data to identify and assist individual students who have behavioral issues.</p>	<p>Evidence for Suggested Activity 8b</p> <ul style="list-style-type: none"> <input type="checkbox"/> Referrals OR <input type="checkbox"/> Behavior charts OR <input type="checkbox"/> Behavior plan OR <input type="checkbox"/> Functional Behavior Assessment samples
	<p>Suggested Activity 8c</p> <p>Use school data to identify and assist individual students who do not perform at grade level and do not have opportunities and resources to be successful in school.</p>	<p>Evidence for Suggested Activity 8c</p> <ul style="list-style-type: none"> <input type="checkbox"/> Student plans OR <input type="checkbox"/> Score reports OR <input type="checkbox"/> Implementation plans

	<p>Suggested Activity 8d</p> <p>Use student and school site data to monitor student progress and to ensure all students receive what they need to achieve school success.</p>	<p>Evidence for Suggested Activity 8d</p> <ul style="list-style-type: none"> <input type="checkbox"/> Disaggregated data analysis OR <input type="checkbox"/> Interpretation of cognitive, aptitude, and achievement tests OR <input type="checkbox"/> Student Action Plans OR <input type="checkbox"/> Interventions OR <input type="checkbox"/> Results of plans
STANDARD 9	PROFESSIONAL ACTIVITIES	DOCUMENTATION
<p>The professional school counselor develops a system for evaluating the results of the counseling program.</p>	<p>Suggested Activity 9a</p> <p>Use data to evaluate the counseling program effectiveness and to determine program needs.</p>	<p>Evidence for Suggested Activity 9a</p> <ul style="list-style-type: none"> <input type="checkbox"/> Results of formal and informal methods of program evaluation OR <input type="checkbox"/> Report on how data will modify the counseling program. OR <input type="checkbox"/> Data based report on the effectiveness of the program OR <input type="checkbox"/> Revisions that will be made to the program and the rationale.
	<p>Suggested Activity 9b</p> <p>Share the results of the program assessment with faculty, parents, and students.</p>	<p>Evidence for Suggested Activity 9b</p> <ul style="list-style-type: none"> <input type="checkbox"/> Agenda/attendance lists OR <input type="checkbox"/> Presentation handouts OR <input type="checkbox"/> Power points

STANDARD 10	PROFESSIONAL ACTIVITIES	DOCUMENTATION
<p>The professional school counselor is an advocate for students, a leader, collaborator, and a systems change agent.</p>	<p>Suggested Activity 10a</p> <p>Participate in community based intervention trainings (e.g. ASCA webinars).</p>	<p>Evidence for Suggested Activity 10a</p> <ul style="list-style-type: none"> <input type="checkbox"/> Certificates of completion
	<p>Suggested Activity 10b</p> <p>Participate in a local, state, or a national professional organization to improve level of competence</p>	<p>Evidence for Suggested Activity 10b</p> <ul style="list-style-type: none"> <input type="checkbox"/> Meeting minutes OR <input type="checkbox"/> Agendas OR <input type="checkbox"/> Other documentation verifying service
	<p>Suggested Activity 10c</p> <p>Share professional knowledge and skills at a district, complex, state or national level conference.</p>	<p>Evidence for Suggested Activity 10c</p> <ul style="list-style-type: none"> <input type="checkbox"/> Power points OR <input type="checkbox"/> Reflections OR <input type="checkbox"/> Verification of presentation OR <input type="checkbox"/> Sample of completed activities
	<p>Suggested Activity 10d</p> <p>Collaborates with teacher, parents, and the community to promote academic success</p>	<p>Evidence for Suggested Activity 10d</p> <ul style="list-style-type: none"> <input type="checkbox"/> Meeting minutes OR <input type="checkbox"/> Documents that were completed OR <input type="checkbox"/> Results of the implementation

	<p>Suggested Activity 10e</p> <p>Advocating for students at IEP meetings and other student related meetings.</p>	<p>Evidence for Suggested Activity 10e</p> <ul style="list-style-type: none"><input type="checkbox"/> Student learning goals OR<input type="checkbox"/> Modes and examples of assessments that were used OR<input type="checkbox"/> Samples of student work OR<input type="checkbox"/> Compilation and analysis of student achievement of learning goals
--	--	---