

## Ed 606.03 Verification of a Candidate's Completion of A PEPP (a)(1-6)

Candidate Name:		EIS Ed Id #:		IHE AEPP level enrolled <small>(BA, MEd, Licensure only. etc.):</small>		<b>[602.18(b)]</b> <small>*documentation kept for 10 years</small>
<b>DATE SELECTED/ADMITTED for AEPP:</b>						**
Bachelor's degree: Major:		Institution:		Date Conferred:		**
Master's Degree: Major:		Institution:		Date Conferred:		**
OTHER Degree(s): Major:		Institution:		Date Conferred:		**
<b>PEPP 'gateway' #1-* (application, GPA, testing, experience, BASA, CHRC)</b>						
<b>(1) Passing score in Nat 'l recognized test/assessment of academic proficiency*[+Ed 505.01] ~</b>						
Reading Assessment:		Date:		Score:		**
Writing Assessment:		Date:		Score:		**
Math Assessment:		Date:		Score:		**
<b>(2) Criminal History Records Check CLEARANCE [+604.05; 504.12] ~</b>						
<small>*Prior to 11/2/22 completed by IHE;</small>			<small>Admitted 11/2/22 and on, date NHED CHRC Clearance issued:</small>			
CHRC Date:		<b>-OR-</b>	Demonstrated CHRC Clearance from NHED [604.05]			**
Location completed:						
<b>STOP: Candidate MUST have passing BASA (R,W,M) scores, and a CHRC Clearance PRIOR to full admittance. Candidate cannot proceed into the PEPP without these minimum requirements [603.02].</b> <b>STOP: PEPPs shall not place candidates in or allow candidates to commence any unsupervised clinical experience as described in Ed 604 without the candidate first obtaining criminal history records check clearance credential.</b>						
<b>'gateway' #2-*</b> CANDIDATE ASSESSMENT, date candidate fully admitted: Must have met BASA and CHRC Clearance**	<b>'gateway' #3-*</b> CANDIDATE ASSESSMENT; early clinicals, GPA, courses, etc.**	<b>'gateway' #4-*</b> CANDIDATE ASSESSMENT; culminating clinicals, GPA, courses, etc., coursework, content testing, NHTCAP, etc.**	<b>'gateway' #5-*</b> CANDIDATE ASSESSMENT, <b>VERIFICATION</b> and PROGRAM COMPLETION**			
<b>(5) Completion of a culminating clinical experience, involving both the clinical supervisor(s) and the clinical educator(s) in the evaluation of each candidate's satisfactory demonstration of Ed 607.03 and Ed 607.04- [604] ~</b>						
Clinical Educator(s) <small>Name(s): (school-based; district for Admin)</small>		CE years of experience in licensure assignment (at least 3 or more):		CS, CE, Candidate collaborative evaluations		** <small>**?license comparability?</small>
CE NH license(s)/endorse held and expiration (or comp**):		CE current school/SAU assignment:		CS frequent, direct observation, evaluation, and ongoing support		**
Clinical Supervisor Name (IHE):		CS **demonstration of competency in the depth and range of knowledge, skills, and dispositions				**
<b>(3) Completion of Degree/AEPP ~</b>						
Degree required for this license:		Date Degree Conferred:		NHED License:		**
<b>(4) **Documentation of each candidate's acquisition of the knowledge, skills, and dispositions articulated in Ed 607 and Ed 608~ (candidate assessments) [604]**</b>						**
<b>**List of Required Documentation to Include:</b> <ul style="list-style-type: none"> <li>➤ <b>PEPP requirements (list) of IHE Program/Course Requirements for each licensure area</b></li> <li>➤ <b>Official Transcript(s)</b> (must have Registrar signature)</li> <li>➤ <b>Praxis CORE</b> (or BOC approved comparable assessment evaluation) <b>Official Score Report(s)</b></li> <li>➤ <b>NHED Guidance for Degree and Experience Requirements: BoC and BoEPHE (11/6/23)</b></li> <li>➤ <b>Other relevant documentation application to candidate's eligibility (see **)</b></li> </ul>						

~unique requirements (not an all-inclusive list) ~

<input type="checkbox"/> <b>ELEMENTARY EDUCATION (K-8) [507.11]:</b>	<input type="checkbox"/> Have a content concentration in English/language arts, mathematics, social studies, or general science- _____ <input type="checkbox"/> **IHE documentation of evidence of concentration (approximately 15 credits) <input type="checkbox"/> ***Passing middle school content Praxis II score in the given content area listed
<input type="checkbox"/> <b>ESOL: [507.17]</b>	<input type="checkbox"/> Demonstrate language proficiency in oral and written English in social and academic settings for ELs  Have had the experience of studying a second language, (may include ASL, by one of the following: <input type="checkbox"/> a. Successfully complete at least 2 semesters of a second language at the college level; <b>or</b> <input type="checkbox"/> b. Demonstrate equivalent competence in another language through residency abroad of at least 6 months or evidence of being a native or heritage speaker.
<input type="checkbox"/> <b>WORLD LANGUAGE [507.38]</b>	Except as provided for ASL, an intensive experience at the advanced level in the target language, such as, but not limited to: <input type="checkbox"/> a. A term of residence in the country/community of the target language; <input type="checkbox"/> b. A service-learning experience requiring the use of the target language; or <input type="checkbox"/> c. A term of residence in a certified total immersion program in the target language; and [...] _____
<input type="checkbox"/> <b>SUPERINTENDENT: [506.01]</b>	<input type="checkbox"/> <i>Pro-Ed Requirements [505.03]</i> <input type="checkbox"/> <i>Pro-Admin Requirements [505.04]</i>  Completed one of the following: <input type="checkbox"/> a. A state-approved master's level program in education administration or educational leadership from an institution accredited by a regional accrediting body approved by the U.S. Department of Education; or <input type="checkbox"/> b. A master's program in education or related field and a state board of education-approved district-level administration mentorship program under a licensed superintendent; <i>NH Licensure only PEPPs: candidate must have above mentioned degree.</i>  <input type="checkbox"/> 5 years experience as an <b>education administrator k-12</b> <div style="text-align: right;"> <input type="checkbox"/> School/Location: _____  <input type="checkbox"/> Position: _____           </div>
<input type="checkbox"/> <b>SPECIAL EDUCATION ADMINISTRATOR: [506.04]</b>	<input type="checkbox"/> <i>Pro-Ed Requirements [505.03]</i> <input type="checkbox"/> <i>Pro-Admin Requirements [505.04]</i> <input type="checkbox"/> Have completed at least 5 years' experience as a special educator or in a related field; and <div style="text-align: right;"> <input type="checkbox"/> School/Location: _____  <input type="checkbox"/> Position: _____           </div> (3) Have one of the following: <input type="checkbox"/> a. Completed a state-approved master's level program leading to special education administrator licensure from an institution accredited by a regional accrediting body approved by the U.S. Department of Education; or <input type="checkbox"/> b. Completed a master's program in education or a special education-related field and demonstrate the requirements [...]: _____
<input type="checkbox"/> <b>CURRICULUM ADMINISTRATOR [506.05]</b>	<input type="checkbox"/> <i>Pro-Ed Requirements [505.03]</i> <input type="checkbox"/> <i>Pro-Admin Requirements [505.04]</i> <input type="checkbox"/> Have at least 3 years' experience as a teacher;  <div style="text-align: right;"> <input type="checkbox"/> School: _____  <input type="checkbox"/> Location: _____  <input type="checkbox"/> Dates: _____           </div> Have one of the following: <input type="checkbox"/> a. Completed a state-approved master's level program leading to curriculum administrator licensure from an institution accredited by a regional accrediting body approved by the U.S. Department of Education; or <input type="checkbox"/> b. Completed a master's program in education or related field and demonstrate the requirements outlined in [...]: _____
<input type="checkbox"/> <b>PRINCIPAL: [506.06]</b>	<input type="checkbox"/> <i>Pro-Ed Requirements [505.03]</i> <input type="checkbox"/> <i>Pro-Admin Requirements [505.04]</i>  <input type="checkbox"/> Have completed at least 3 years' experience as a teacher, instructional specialist, educational specialist, or education administrator; <div style="text-align: right;"> <input type="checkbox"/> School: _____  <input type="checkbox"/> Location: _____  <input type="checkbox"/> Dates: _____           </div> Have one of the following: <input type="checkbox"/> a. Completed a state-approved master's level program leading to school principal licensure from an institution accredited by a regional accrediting body approved by the U.S. Department of Education; or <input type="checkbox"/> b. Completed a master's program in education or related field and demonstrated: [...] _____
<input type="checkbox"/> <b>READING and WRITING SPECIALIST [508.09]</b>	<input type="checkbox"/> <i>Pro-Ed Requirements [505.03]</i> <input type="checkbox"/> At least a <b>master's degree in literacy or a related field</b> ; <input type="checkbox"/> Completed at least <b>3 years of classroom teaching</b>  <div style="text-align: right;"> <input type="checkbox"/> School/Location: _____  <input type="checkbox"/> Position: _____           </div>

**Reminder: ALL CANDIDATES ENROLLED, and CANDIDATES RECOMMENDED as PROGRAM COMPLETERS including those WITHOUT CONTENT TESTING AND WITHOUT REQUIRED EXPERIENCE... MUST BE PROVIDED DIRECT DISCLOSURE- DOCUMENTATION AND ACKNOWLEDGEMENT OF FEDERAL LICENSURE DISCLOSURE REQUIREMENTS (FOR NH AND ALL OTHER STATES- HEA).**