

# Classification of Instructional Programs (CIP) Self Review 2008-2013 for Michigan Secondary Career and Technical Education (CTE) State Approved Program

The "Career and Technical Education State-Approved CIP Program Self-Review 2008-09 to 2012-13" process used by the OCTE requires administrators and instructors of all secondary state-approved CTE programs (both wage earning and Family and Consumer Science) to conduct a self-review of their programs based on key criteria. Based on this self-review, improvement needs for the program are identified and a plan of action is to be developed and implemented. Thank you for your dedication to excellence.

## *The CIP Self-Review:*

- Is designed as a growth experience for teachers and administrators
- Helps ensure program quality
- Identifies promising practices and areas of concern
- Must be reviewed and signed by administrator

## *The CIP Self-Review SHOULD NOT:*

- Be completed for Less Than Class Size Programs
- Be completed for Capstone or Co-op programs

## *The Technical Review Assistance and Compliance (TRAC) system:*

- Provides on-site review of grant recipients/CTE Programs
- Assesses compliance with state and federal laws that govern funding
- Is conducted by the Office of Career and Technical Education (OCTE)
- Provides technical assistance for continuous improvement of state approved CTE programs

## **Administrator Responsibilities**

### *A Regional CIP Self-Review Summary:*

- Must be initiated by the Regional CTE Administrator
- Must be completed annually by the Regional CTE Administrator
- Must be submitted to the Office of Career and Technical Education(OCTE) by JUNE 30
- Must include 20% of the regions state approved CTE programs annually
- Must include a full local review of all CTE state approved programs within a five year cycle to be reviewed locally

## **Teacher Completion Instructions**

### *The CIP Self-Review:*

- Must be completed for Programs with ANY student enrollment entered into the Career and Technical Education Information System (CTEIS).
- Must include original signed copies of the CIP Self-review certification page.
- Must include all necessary evidence as requested and listed on the form
- Must be updated annually
- Must be organized by category

**Make one copy** of the completed document to keep in your files along with all documentation provided for the program review. Return the original CIP Self Review to your regional administrator. If you need further clarification on this document or process, please contact your administrator or any OCTE program consultant at 517-373-3373. **For wage earning program content questions**, see the Program Resource Guide at [www.mccte-fsu.org/](http://www.mccte-fsu.org/) (click on Publications/then Resource Guide/then pathway/CIP program, for FCS go to [www.michigan.gov/octe](http://www.michigan.gov/octe)).

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## How to complete your CIP Self Review:

Complete one CIP Self-review for each CIP Program (**note:** Multiple teachers within one program will need to collaborate in preparing the review.)

- **Instructional Staff and CTE Administrators should collaborate** in the completion and collection of evidence for this self-review. Administrators are required to sign the last page of the CIP Self Review (certification sheet).
- **Authorizing Legislation** and relevant reference documents are provided in the left hand column for each criterion. Web sites and State of Michigan policy references are also included in this area. All criteria have been assigned a Priority Level for the continuation of State Approval of the program.
- **Required evidence** is printed in boxes next to each criterion. Written documentation is required for all criteria and should be appropriately identified by criterion area (i.e. CO1, CO2, etc.)
- Signature Page: Must be completed with all information and signatures.
- Examples of required documentation are included in the Program Resource Guide found at [www.mccte-fsu.org](http://www.mccte-fsu.org) (Does not apply to FCS)

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**Primary Instructor's Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Primary Instructor's E-mail:** \_\_\_\_\_

**Primary Instructor's Phone Number:** \_\_\_\_\_ **Extension:** \_\_\_\_\_

**OCTE Program Name:** \_\_\_\_\_

**School Program Identifying Name (if different):** \_\_\_\_\_

**CEPD:** \_\_\_\_\_ **Program Serial Number (PSN):** \_\_\_\_\_ **CIP Code:** \_\_\_\_\_

**Contracted Program**    **Expiration Date of Contract**

**Administrator's Name:** \_\_\_\_\_ **Yes or No** \_\_\_\_\_

**Program Building:** \_\_\_\_\_

**Program Street Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** Michigan **Zip Code:** \_\_\_\_\_ **Building Phone Number:** \_\_\_\_\_

The following items are indicators of compliance with program funding guidelines (CTE Perkins, State Added Cost, Administrative Guide) and program quality. For each item, the established criteria must be fully met. This self-review must be completed by the program instructor(s). Supporting documents/evidence must be kept on file at the program site/location and readily available during onsite review.

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			Yes	No
<p><b>C01 – Program Staff</b></p> <p>Carl D. Perkins, § 114(d)(2)(B)(ii)</p> <p>Administrative Guide for Career and Technical Education in Michigan</p> <p>Each teacher should complete this page and provide all evidence</p> <p>Teacher may verify their teaching certificate by going to <a href="https://mdoe.state.mi.us/teachercert/">https://mdoe.state.mi.us/teachercert/</a>; however copy of actual certificate is required.</p>	<p><b>Program Staff: Teacher is appropriately certificated</b></p> <p>C01 - PROGRAM STAFF: Each teacher completes this page. This page must be duplicated if there are additional teachers in the program.</p> <p><i>Instructor's Name:</i> _____</p> <p><i>Other name(s) under which certification is/has been held:</i> _____</p> <p><b>Appropriately Certificated Teacher-</b></p> <p><i>Michigan Teaching Certificate(s) Number(s)</i> _____</p> <p>_____</p> <p><i>Endorsement(s):</i> _____</p> <p>Including _____</p> <p>Occupational/Vocational _____</p> <p><i>Expiration Date:</i> _____</p> <p><b>Check only those that apply:</b> Current valid Michigan Teaching Certificate: <b>One or more of the following applies:</b></p> <div style="border: 1px solid black; padding: 5px; display: inline-block;"> <input type="checkbox"/> Permanent Certificate  <input type="checkbox"/> Continuing Certificate  <input type="checkbox"/> 30 Hour continuing Certificate  <input type="checkbox"/> Professional Certificate  <input type="checkbox"/> Provisional Certificate  <input type="checkbox"/> Full Vocational  <input type="checkbox"/> Occupational Certificate  <input type="checkbox"/> Interim Occupational Certificate (IOC) /  <input type="checkbox"/> Temporary Vocational Authorization (TVA)         </div> <div style="text-align: center; margin: 10px 0;"> </div> <div style="border: 1px solid black; background-color: yellow; padding: 5px; display: inline-block; text-align: center;">             Legible copy of current valid teaching credential(s). (Front and Back)         </div> <p><input type="checkbox"/> District Holds Annual Authorization <span style="background-color: yellow; padding: 2px;">Copy of current MDE annual authorization issued to school</span></p> <p>Expiration Date: _____</p> <p><input type="checkbox"/> Licensure (if applicable): _____ <span style="background-color: yellow; padding: 2px;">Copy of current state licensure</span></p> <p>_____</p> <p><input type="checkbox"/> Industry Certification(s): _____ <span style="background-color: yellow; padding: 2px;">Copy of current industry certificate</span></p> <p>_____</p> <p><input type="checkbox"/> Community College Instructor <span style="background-color: yellow; padding: 2px;">Copy of annual notification letter to OCTE-CPE Unit Supervisor from Community College</span></p> <p><input type="checkbox"/> Other (specify): _____</p>	<p style="text-align: center;">C01 - PROGRAM STAFF: Each teacher completes this page. This page must be duplicated if there are additional teachers in the program.</p>	<input type="checkbox"/>	<input type="checkbox"/>

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			Yes	No
<b>C02 – Professional Development</b>  Carl D. Perkins, § 135(b)(5)(A-D)  Administrative Guide for Career and Technical Education in Michigan	<b>Professional Development: Teacher PD meets all criteria</b>  Copy this page as necessary for each teacher.  Participation in occupational/professional development in the CTE program area:  Teacher's Name: _____  <input type="checkbox"/> Record of Professional Development (for the specific occupational/CTE content being taught) by the program teacher within the past five-year period.	<div style="border: 1px solid black; background-color: yellow; padding: 5px; width: fit-content;">           Records (agenda and registration receipt) of occupational and/or OCTE classes, workshops, conferences, and/or advanced education.         </div>	<input type="checkbox"/>	<input type="checkbox"/>

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	Program Criteria	Evidence	Administrator's Verification	
			Yes	N/A
<p><b>C03 – Additional Program Staff</b></p> <p>(Does not usually apply to Family and Consumer Sciences Programs)</p> <p>Carl D. Perkins, § 114(d)(2)(B)(ii)</p> <p>Administrative Guide for Career and Technical Education in Michigan</p>	<p><b>Additional Program Staff: Paraprofessional/Aide</b></p> <p>This page may be copied for additional paraprofessionals and/or aides. Each paraprofessional and/or aide working in and with the program should be listed.</p> <p><input type="checkbox"/> Not Applicable (proceed to section C05)</p> <p><input type="checkbox"/> Yes</p> <p>Name(s) of Paraprofessional/Aide:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p><input type="checkbox"/> List Credentials (and certifications if available): <span style="background-color: yellow;">Certification copy, transcripts and/or resume</span></p> <p>_____</p> <p><input type="checkbox"/> Industry Certification(s) <span style="background-color: yellow;">Copy of current industry certification</span></p> <p>_____</p> <p>_____</p> <p><input type="checkbox"/> License (if applicable) and copy of current licensure <span style="background-color: yellow;">Copy of current licensure</span></p> <p>Expiration Date: _____</p> <p><input type="checkbox"/> Paraprofessional provides both General Education and CTE Program Services</p>		<input type="checkbox"/>	<input type="checkbox"/>

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	Program Criteria	Evidence	Administrator's Verification	
			Yes	No
<p><b>C04 – Paraprofessional Professional Development</b></p> <p>(Does not usually apply to Family and Consumer Sciences Programs)</p> <p>Carl D. Perkins, § 135(b)(5)(A-D)</p> <p>Administrative Guide for Career and Technical Education in Michigan</p>	<p><b>Paraprofessional Professional Development</b></p> <p>This page may be copied for additional paraprofessionals and/or aides</p> <p><input type="checkbox"/> Professional Development –</p> <p><input type="checkbox"/> Annual Authorization</p>	<p>Record of activities, classes, workshops, conferences, and/or advanced education within the past five-year period, in area of specialty.</p>	<input type="checkbox"/>	<input type="checkbox"/>

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Program Criteria		Evidence	Administrator's Verification	
C05 – Successful Completer Information	Successful Completer Information		Yes	No
<p>Does not apply to Family and Consumer Sciences Programs</p> <p>Carl D. Perkins, § 134(b)(3)(D)</p> <p>Administrative Guide for Career and Technical Education in Michigan</p>	<p>INSTRUCTIONAL DELIVERY DESIGN INFORMATION: Confirm local agency process for identifying that a local program completer aligns with the state completer definition.</p> <p><b>Program Demonstrates Completion of:</b></p> <p><input type="checkbox"/> Instructional delivery/segments</p> <div style="border: 1px solid black; background-color: yellow; padding: 2px; display: inline-block; margin-left: 20px;">Documentation of curriculum alignment to state program standards by segment.</div>		<input type="checkbox"/>	<input type="checkbox"/>

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	Program Criteria	Evidence	Administrator's Verification	
			Yes	No
<p><b>C06 – Established Advisory Committee</b></p> <p>Carl D. Perkins, § 134(b)(5)</p> <p>Administrative Guide for Career and Technical Education in Michigan</p>	<p><b>Advisory Committee: meets all criteria</b></p> <p>ESTABLISHED ADVISORY COMMITTEE</p> <p>Local Program Advisory Committee meets the following criteria: <b>ALL MUST BE CHECKED</b></p> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> <input type="checkbox"/> Membership roster reflects representatives from the program specific business, industry, and community agencies. *           <input type="checkbox"/> Membership majority from appropriate Business and Industry           <input type="checkbox"/> Committee chairperson from Business and Industry         </div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> <input type="checkbox"/> Committee provides input on planning, development, implementation, operation, promotion, evaluation and maintenance of the program that results in continuous program improvement.           <input type="checkbox"/> Meets a minimum of two times per school year         </div> <p><b>HIGHLY RECOMMENDED</b></p> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> <input type="checkbox"/> Parent Representative           <input type="checkbox"/> Student Representative           <input type="checkbox"/> Counselors           <input type="checkbox"/> Post Secondary         </div> <p><b>IN ADDITION FOR FAMILY AND CONSUMERS SCIENCES ONLY:</b></p> <div style="margin-left: 40px;"> <input type="checkbox"/> One member also sits on the district Reproductive Health Advisory Committee.         </div> <p>* <b>SEE PROGRAM ADVISORY COMMITTEE TOOL KIT FOR MORE INFORMATION</b>  <a href="http://www.michigan.gov/documents/advisory_committee_handbook_125499_7.doc">HTTP://WWW.MICHIGAN.GOV/DOCUMENTS/ADVISORY_COMMITTEE_HANDBOOK_125499_7.DOC</a></p>	<div style="border: 1px solid black; background-color: yellow; padding: 5px; margin-bottom: 10px;">             Membership roster and affiliations with Committee Chairperson from Business and Industry designated on roster.           </div> <div style="border: 1px solid black; background-color: yellow; padding: 5px;">             Meeting minutes with members and attendees listed and minimum of at least two meetings a year.           </div> <div style="border: 1px solid black; background-color: yellow; padding: 5px; margin-top: 10px; width: fit-content; margin-left: auto;">             Reproductive Health Advisory Committee Roster           </div>	<input type="checkbox"/>	<input type="checkbox"/>

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			Yes	No
<p><b>C07 – Expenditure of Funds are within Allowable Categories</b></p> <p>Carl D. Perkins, § 135(b)(1-9), (c)(1-20), (d)</p> <p>Administrative Guide for Career and Technical Education in Michigan</p>	<p><b>Expenditure of Funds: within allowable categories</b></p> <p>SEE USE OF FUNDS GUIDE.</p> <p><b>Program expenditures from Added Cost and Perkins Funds are used for:</b> Check only those that apply <span style="background-color: cyan;">(Not required to check all boxes to meet criteria):</span></p> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> <input type="checkbox"/> Professional Development  <input type="checkbox"/> Instructional Travel  <input type="checkbox"/> Purchase/rental of NEW program equipment (not replacement) for student use  <input type="checkbox"/> Instructional Supplies  <input type="checkbox"/> Assessment and Evaluation  <input type="checkbox"/> Business and Industry Involvement, including Advisory Committee  <input type="checkbox"/> Curriculum Development/Alignment  <input type="checkbox"/> CTSO Organization Approved Expenses         </div> <p><b>Note: Carl D. Perkins dollars can only be used for equipment for student use, NOT instructional equipment (i.e. overhead projector)</b></p> <p><b>Note: Expenditures for Family and Consumer Sciences must be for Parenthood Education Only</b></p>	<div style="border: 1px solid black; background-color: yellow; padding: 5px; width: fit-content; margin: auto;">           Program specific financial records including expenditures detail list with dates.         </div>	<input type="checkbox"/>	<input type="checkbox"/>

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			Yes	No
<p><b>C08 – Facilities</b></p> <p>Carl D. Perkins, § 134(b)(6)</p> <p>Minimum space requirements as stated in the Administrative Guide for Career and Technical Education in Michigan</p> <p>Classroom space:</p>	<p><b>Facilities: meets all criteria</b></p> <p>The facility supports delivery of a quality program through:</p> <p><input type="checkbox"/> Classroom square footage, based upon the usable floor space, meets or exceeds program guidelines for the number of students enrolled.</p> <p style="text-align: center;">* FACILITIES: HAND DRAWING WITH MEASUREMENTS AND DIMENSIONS IS ACCEPTABLE.</p> <p style="text-align: center;">See <b>Resource Guide</b> for specific program requirements  <a href="http://www.mccte-fsu.org">www.mccte-fsu.org</a>, click Publications/Resource Guides  <a href="http://www.mccte-fsu.org/sub_category.php?i=38">http://www.mccte-fsu.org/sub_category.php?i=38</a></p>	<div style="border: 1px solid black; background-color: yellow; padding: 5px; width: fit-content; margin: auto;"> Attendance/enrollment records per course, detailed floor plan of facility with dimensions and pictures. * </div>	<input type="checkbox"/>	<input type="checkbox"/>

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Program Criteria	Evidence	Administrator's Verification	
		Yes	No
<p><b>C09 – Classroom Safety</b></p> <p>Is not assessed for Family and Consumer Sciences Programs</p> <p>Carl D. Perkins, § 135(b)(6)</p> <p>Administrative Guide for Career and Technical Education in Michigan</p>	<p><b>Safety: meets or exceeds safety standards</b></p> <p>School should seek inspection and review by appropriate safety agency and include safety specific to program curriculum. (not assessed for FCS)</p> <p><input type="checkbox"/> Safety records are being kept listing necessary student safety training completion in the program curriculum, and dates completed.</p> <p><b>Note:</b> Program environment meets appropriate regulatory agency safety guidelines (MIOSHA, CDC, FIA, building inspections)</p> <p style="text-align: center;">See <b>Resource Guide</b> for specific program requirements  <a href="http://www.mccte-fsu.org">www.mccte-fsu.org</a>, click Publications/Resource Guides  <a href="http://www.mccte-fsu.org/sub_category.php?i=38">http://www.mccte-fsu.org/sub_category.php?i=38</a></p>	<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;"> <p>Student Safety Training(s) (checklist) with dates students completed</p> <p>(Optional) Safety facility inspections/procedures/checklists including any necessary program licenses (if applicable) with administrator sign off.</p> </div>	<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="border: 1px solid black; width: 40px; height: 40px; margin: 0 auto;"></div> <div style="border: 1px solid black; width: 40px; height: 40px; margin: 0 auto;"></div> </div>

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			Yes	No
<p><b>C10 – Implementation of Standards/Course Content</b></p> <p>Carl D. Perkins, § 113(b)(2)(A)(i-vi)</p> <p>Administrative Guide for Career and Technical Education in Michigan</p>	<p><b>Implementation of Standards/Course Content</b>  <b>SEE NEXT PAGE FOR FAMILY AND CONSUMER SCIENCES THIS PAGE DOES NOT APPLY TO FCS</b></p> <p><b>OCCUPATIONAL PROGRAMS</b>  <i>All must be checked to meet criteria</i>            Curriculum is based on and reflects:</p> <p><input type="checkbox"/> Alignment to National and State Program Standards designated by OCTE including:</p> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> <input type="checkbox"/> Career Cluster Foundation Standards  <input type="checkbox"/> Career Cluster Pathway Standards  <input type="checkbox"/> Michigan CTE Technical Standards  <input type="checkbox"/> Michigan Technology Standards  <input type="checkbox"/> Michigan Career and Employability Standards  <input type="checkbox"/> Michigan Department of Education Academic Content Expectations  <input type="checkbox"/> Curriculum by segment (i.e. courses, units, modules)         </div> <p>Program Curriculum:</p> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> <input type="checkbox"/> Preparation for program specific job titles  <input type="checkbox"/> Preparation for post-high school placement  <input type="checkbox"/> Curriculum provides leadership experiences for students         </div> <p><input type="checkbox"/> <b>LEADERSHIP COMPONENT – CHECK ALL THAT APPLY</b></p> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> <input type="checkbox"/> 1. CTSO Participation  <input type="checkbox"/> 2. Community Service  <input type="checkbox"/> 3. Student led meetings with elected officers  <input type="checkbox"/> 4. Competitive event(s) with at least one other School or sets of students AM/PM         </div>	<div style="border: 1px solid black; background-color: yellow; padding: 5px; margin: 5px 0;">           Curriculum alignment documents &amp; curriculum documents with proof of integration of academics into curriculum.         </div> <div style="border: 1px solid black; background-color: yellow; padding: 5px; margin: 5px 0;">           Syllabi/curriculum guide. Program alignment document has post secondary portion completed.         </div> <div style="border: 1px solid black; background-color: yellow; padding: 5px; margin: 5px 0;">           Membership Roster with meeting minutes            Community Service participation documentation            Documentation of community service activities            Meeting minutes with list of officers within classroom            Documentation of competition with other school(s). Membership list            Award/certificate example         </div>	<input type="checkbox"/>	<input type="checkbox"/>

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	<b>Implementation of Standards/Course Content</b>		<b>Yes</b>	<b>No</b>
<p>State Approved Family and Consumer Sciences Programs Only:</p> <p><b>C10 – Implementation of Standards/Course Content</b></p> <p>Administrative Guide for Career and Technical Education in Michigan (M)</p>	<p><b><u>THIS PAGE FOR FAMILY &amp; CONSUMER SCIENCE PROGRAMS ONLY</u></b></p> <p>Curriculum is based on and reflects:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Alignment to National and State Program Standards:</li> <li><input type="checkbox"/> National Family &amp; Consumer Science Standards</li> <li><input type="checkbox"/> Michigan Family &amp; Consumer Science Content Expectations</li> <li><input type="checkbox"/> Michigan Career and Employability Standards</li> </ul> <p>Program Curriculum:</p> <div style="border: 1px solid black; padding: 5px;"> <ul style="list-style-type: none"> <li><input type="checkbox"/> Reflects FCS state-approved course/credit guides</li> <li><input type="checkbox"/> Curriculum demonstrates integration of established Michigan Academic Content Expectations.</li> </ul> </div> <p><i>Operation of Parenthood Education plus 3 other state-approved courses. Curriculum reflects Family &amp; Consumer Science state-approved course guides.</i></p> <div style="border: 1px solid black; padding: 5px;"> <ul style="list-style-type: none"> <li><input type="checkbox"/> Parenthood Education (required)</li> <li><input type="checkbox"/> Human Development</li> <li><input type="checkbox"/> Personal Development</li> <li><input type="checkbox"/> Interpersonal Relationships</li> <li><input type="checkbox"/> Financial Management</li> <li><input type="checkbox"/> Health and Wellness</li> <li><input type="checkbox"/> Nutrition Science</li> <li><input type="checkbox"/> Balancing Responsibilities</li> </ul> </div> <p>Leadership Curriculum: <b>(optional)</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> FCCLA Membership</li> </ul>	<div style="border: 1px solid black; background-color: yellow; padding: 2px; margin: 5px 0;">Crosswalk of local curriculum to Standards.</div> <div style="border: 1px solid black; background-color: yellow; padding: 2px; margin: 5px 0;">Syllabi/course curriculum guides.</div> <div style="border: 1px solid black; background-color: yellow; padding: 2px; margin: 5px 0;">Course syllabi Master schedule</div> <div style="border: 1px solid black; background-color: yellow; padding: 2px; margin: 5px 0;">Membership Roster</div>	<input type="checkbox"/>	<input type="checkbox"/>

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Program Information		Method				
<b>C11 – Program Characteristics</b>  Information gained from this page is designed to aid administrators and educators in efforts to award academic credit from CTE Programs.	<b>Program/Course information ONLY, will not result in findings.</b>  Does your program offer academic credit of any kind? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, please complete the following information:		<b>Highly Qualified Academic Teacher</b>	<b>Collaborative Teaching Model</b>		
<b>ACADEMIC CREDITS(S) FROM PROGRAM:</b>		½ CREDIT	1 CREDIT	MORE THAN 1 CREDIT (ENTER AMOUNT)		
<input type="checkbox"/> SCIENCE				___ CREDIT(S)	<input type="checkbox"/>	<input type="checkbox"/>
BIOLOGY	<input type="checkbox"/>	<input type="checkbox"/>		___ CREDIT(S)	<input type="checkbox"/>	<input type="checkbox"/>
3 <sup>RD</sup> SCIENCE	<input type="checkbox"/>	<input type="checkbox"/>		___ CREDIT(S)	<input type="checkbox"/>	<input type="checkbox"/>
CHEMISTRY	<input type="checkbox"/>	<input type="checkbox"/>		___ CREDIT(S)	<input type="checkbox"/>	<input type="checkbox"/>
PHYSICS	<input type="checkbox"/>	<input type="checkbox"/>		___ CREDIT(S)	<input type="checkbox"/>	<input type="checkbox"/>
ANATOMY & PHYSIOLOGY	<input type="checkbox"/>	<input type="checkbox"/>		___ CREDIT(S)	<input type="checkbox"/>	<input type="checkbox"/>
OTHER: _____	<input type="checkbox"/>	<input type="checkbox"/>		___ CREDIT(S)	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> MATH				___ CREDIT(S)	<input type="checkbox"/>	<input type="checkbox"/>
4 <sup>TH</sup> MATH	<input type="checkbox"/>	<input type="checkbox"/>		___ CREDIT(S)	<input type="checkbox"/>	<input type="checkbox"/>
ALGEBRA 1	<input type="checkbox"/>	<input type="checkbox"/>		___ CREDIT(S)	<input type="checkbox"/>	<input type="checkbox"/>
ALGEBRA 2	<input type="checkbox"/>	<input type="checkbox"/>		___ CREDIT(S)	<input type="checkbox"/>	<input type="checkbox"/>
GEOMETRY	<input type="checkbox"/>	<input type="checkbox"/>		___ CREDIT(S)	<input type="checkbox"/>	<input type="checkbox"/>
STATISTICS	<input type="checkbox"/>	<input type="checkbox"/>		___ CREDIT(S)	<input type="checkbox"/>	<input type="checkbox"/>
CALCULUS	<input type="checkbox"/>	<input type="checkbox"/>		___ CREDIT(S)	<input type="checkbox"/>	<input type="checkbox"/>
OTHER: _____	<input type="checkbox"/>	<input type="checkbox"/>		___ CREDIT(S)	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> ENGLISH LANGUAGE ARTS	<input type="checkbox"/>	<input type="checkbox"/>		___ CREDIT(S)	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> SOCIAL STUDIES	<input type="checkbox"/>	<input type="checkbox"/>		___ CREDIT(S)	<input type="checkbox"/>	<input type="checkbox"/>
ECONOMICS	<input type="checkbox"/>	<input type="checkbox"/>		___ CREDIT(S)	<input type="checkbox"/>	<input type="checkbox"/>
GOVERNMENT	<input type="checkbox"/>	<input type="checkbox"/>		___ CREDIT(S)	<input type="checkbox"/>	<input type="checkbox"/>
OTHER: _____	<input type="checkbox"/>	<input type="checkbox"/>		___ CREDIT(S)	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> VISUAL AND PERFORMING ARTS	<input type="checkbox"/>	<input type="checkbox"/>		___ CREDIT(S)	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> ON-LINE LEARNING	<input type="checkbox"/>	<input type="checkbox"/>		___ CREDIT(S)	<input type="checkbox"/>	<input type="checkbox"/>

## Classification of Instructional Programs (CIP) Self Review 2008-2013 for Michigan Secondary Career and Technical Education (CTE) State Approved Program

	Program Criteria	Evidence	Administrator's Verification	
			Yes	No
<p><b>C12 – Recommended Equipment</b></p> <p>Carl D. Perkins, § 114(d)(2)(B)(vi); § 135(b)(7, 8)</p> <p>Administrative Guide for Career and Technical Education in Michigan</p> <p>Program Specific Equipment : <a href="http://www.michigan.gov/octe">www.michigan.gov/octe</a> Check for each program.</p>	<p><b>Recommended Equipment: meets all criteria</b></p> <p><input type="checkbox"/> Appropriate technology is available for curriculum delivery</p> <p><input type="checkbox"/> Appropriate equipment is available for curriculum delivery</p> <p><input type="checkbox"/> Resources available for student and instructional use appropriate for the program</p> <p style="padding-left: 20px;"><input type="checkbox"/> Classroom set of textbooks less than five years old</p> <p style="padding-left: 20px;"><input type="checkbox"/> Software less than five years old</p> <p style="padding-left: 20px;"><input type="checkbox"/> Relevant supplemental resources, books and software</p>	<div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;">Technology Inventory with dates purchased</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;">Equipment Inventory with dates purchased</div> <div style="border: 1px solid black; padding: 5px;">Copyright dates of textbooks</div> <div style="border: 1px solid black; padding: 5px;">Copyright dates of software</div> <div style="border: 1px solid black; padding: 5px;">Copyright dates of resources</div>	<input type="checkbox"/>	<input type="checkbox"/>

## Classification of Instructional Programs (CIP) Self Review 2008-2013 for Michigan Secondary Career and Technical Education (CTE) State Approved Program

Program Criteria	Evidence	Administrator's Verification	
		Yes	No
<p><b>C13 – Strategies to eliminate barriers to program access</b></p> <p>Carl D. Perkins, § 134(b)(8-10)</p> <p>Administrative Guide for Career and Technical Education in Michigan</p> <p><a href="http://www.michigan.gov/mde/0,1607,7-140-6530_2629---,00.html">http://www.michigan.gov/mde/0,1607,7-140-6530_2629---,00.html</a></p>	<p><b>Strategies to eliminate barriers to program access</b></p> <p>Program employs strategies to eliminate barriers to program access (all must be checked):</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Room arrangement, facility is accessible for all students (including disabled individuals) and includes at least one adjustable workstation.</li> <li><input type="checkbox"/> Curriculum and materials are free of bias</li> <li><input type="checkbox"/> Recruitment strategies are fair and unbiased</li> <li><input type="checkbox"/> Classroom environment is gender fair</li> <li><input type="checkbox"/> Program employs strategies to recruit students to programs non-traditional for their gender</li> <li><input type="checkbox"/> Program enrollment is accessible to all students</li> <li><input type="checkbox"/> Program Application/ Policy/Procedures is/are fair to all students</li> </ul>	<div style="border: 1px solid black; background-color: yellow; padding: 2px; margin-bottom: 5px;">Invoice or picture.</div> <div style="border: 1px solid black; background-color: yellow; padding: 2px; margin-bottom: 5px;">Curriculum materials Recruitment materials Other Bias free materials</div> <div style="border: 1px solid black; background-color: yellow; padding: 2px; margin-bottom: 5px;">Program brochure Course enrollment demographic data  Copy of agency annual notice of CTE opportunities</div> <div style="border: 1px solid black; background-color: yellow; padding: 2px;">Program applications/pre-requisites Copy of policy/procedure</div>	<div style="border: 1px solid black; width: 30px; height: 30px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 30px; height: 30px;"></div>

# Classification of Instructional Programs (CIP) Self Review 2008-2013 for Michigan Secondary Career and Technical Education (CTE) State Approved Program

	Program Criteria	Evidence	Administrator's Verification	
			Yes	No
<p><b>C14 – Work Based Learning</b></p> <p>Does not apply to Family and Consumer Sciences Programs</p> <p>Carl D. Perkins, § 135(b)(3, 4)</p> <p>Administrative Guide for Career and Technical Education in Michigan</p>	<p><b>Work-Based Learning: meets all criteria</b></p> <p>CTE Program-related Work Based Learning is required for <b>all</b> occupational students.</p> <p><b>Required:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> At least one CTE work-based learning experience for <u>each student</u> related to program interest area</li> <li><input type="checkbox"/> Following work-based learning state guidelines</li> </ul> <div style="border: 1px solid black; background-color: yellow; padding: 5px; margin: 10px 0;"> <p style="text-align: center; margin: 0;"><b>SAMPLE EVIDENCE</b></p> <p style="margin: 0;">Student list indicating experience for every student in specific occupational program area. School district documentation of WBL</p> </div> <p style="text-align: center; font-size: 1.5em; font-weight: bold;">AND</p> <p><b>Criteria is met if at least one Work Based learning experience specific to the occupational area is checked below for all students in a program:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Cooperative Education experiences specific to the Occupational program*</li> <li><input type="checkbox"/> Capstone Experiences *</li> <li><input type="checkbox"/> Job Shadowing</li> <li><input type="checkbox"/> Field Trips</li> <li><input type="checkbox"/> Internships/Externships</li> <li><input type="checkbox"/> Work-based Learning – Rotations *</li> <li><input type="checkbox"/> School Based Enterprise(s) sponsored by Business &amp; Industry partner for public access.</li> <li><input type="checkbox"/> Other – (describe): _____</li> </ul> <p><b>NOTE:</b> In-District Placements for Specific Programs Outlined in the Pupil Accounting Manual</p> <p>* Must follow Pupil Accounting Guidelines</p> <ul style="list-style-type: none"> <li>• <b>Pupil Accounting Manual:</b> <a href="http://www.michigan.gov/mde/0,1607,7-140-6530_9091_48553---,00.html">http://www.michigan.gov/mde/0,1607,7-140-6530_9091_48553---,00.html</a></li> <li>• <b>Work-Based Learning:</b> <a href="http://www.michigan.gov/mde/0,1607,7-140-6530_2629_8423-17155--,00.html">http://www.michigan.gov/mde/0,1607,7-140-6530_2629_8423-17155--,00.html</a></li> </ul>	<div style="border: 1px solid black; background-color: yellow; padding: 5px; margin: 10px 0;"> <p style="text-align: center; margin: 0;"><b>SAMPLE EVIDENCE</b></p> <p style="margin: 0;">1. Training agreement sample. 2. Permission slip sample. 3. Sample Student EDP. 4. Training Plan Sample Documentation showing all students participated in one experience, (with dates)</p> </div>	<input type="checkbox"/>	<input type="checkbox"/>

## Classification of Instructional Programs (CIP) Self Review 2008-2013 for Michigan Secondary Career and Technical Education (CTE) State Approved Program

	Program Criteria	Evidence	Administrator's Verification	
			Yes	No
<p><b>C15 – Data Accuracy Verification</b></p> <p>Carl D. Perkins, § 122(c)(13); § 134(a), (b)(1, 2)</p> <p>Administrative Guide for Career and Technical Education in Michigan</p>	<p><b>Data Accuracy Verification</b></p> <p>Teacher's official enrollment records by section:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Career and Technical Education Information System (CTEIS) reported enrollments accuracy verified</li> <li><input type="checkbox"/> Teacher has knowledge of Core Performance Indicator (CPI) Data (does not apply to FCS)</li> <li><input type="checkbox"/> Family &amp; Consumer Science documentation – four state-approved courses are being delivered</li> </ul> <p style="text-align: center;">CTEIS Findings in this area will be located under 'Data' Review</p>	<div style="border: 1px solid black; background-color: yellow; padding: 5px;"> <p>Program Enrollment records, Teachers grade/attendance book. Master Schedule - School Calendar Interview questions are answered appropriately</p> </div> <div style="border: 1px solid black; background-color: yellow; padding: 5px; margin-top: 5px;"> <p>Master Schedule showing all FCS courses.</p> </div>	<input type="checkbox"/>	<input type="checkbox"/>

## Classification of Instructional Programs (CIP) Self Review 2008-2013 for Michigan Secondary Career and Technical Education (CTE) State Approved Program

	Program Criteria	Evidence	Administrator's Verification	
			Yes	No
<p><b>C16 – Postsecondary-Secondary Alignment/Linkages</b></p> <p>May not apply to Family and Consumer Sciences</p> <p>Carl D. Perkins, § 203(c)(2)(A),(3)(B)</p> <p>Administrative Guide for Career and Technical Education in Michigan</p>	<p><b>Postsecondary – Secondary Alignment Linkages:</b></p> <p>At least one post-secondary CTE option must be available in all state-approved secondary CTE programs.</p> <p><b>Program must check one or more of the following criteria:</b></p> <p><input type="checkbox"/> 1. A current valid formal Articulation Agreement(s) between the program and post secondary institution</p> <p><input type="checkbox"/> 2. Concurrent enrollment</p> <p><input type="checkbox"/> 3. Direct Credit</p> <p><input type="checkbox"/> 4. Dual Enrollment</p>	<p>Articulation agreement copy, dated and signed within the last year including a <b>Program of Study</b></p> <p>Contractual Agreements</p> <p>Contractual Agreements</p> <p>Contractual Agreements</p>	<input type="checkbox"/>	<input type="checkbox"/>

**Classification of Instructional Programs (CIP) Self Review 2008-2013 for  
Michigan Secondary Career and Technical Education (CTE) State Approved Program**

	<b>Program Criteria</b>	<b>Evidence</b>
<b>C17 – Unique Program Features</b>	<b>Unique Program Features</b> Please highlight special features of the program:	

**Classification of Instructional Programs (CIP) Self Review 2008-2013 for  
Michigan Secondary Career and Technical Education (CTE) State Approved Program**

	<b>Program Criteria</b>	<b>Evidence</b>
<p><b>C18 – Technical Assistance</b></p> <p>Carl D. Perkins, § 123(b)(3)</p> <p>Administrative Guide for Career and Technical Education in Michigan</p>	<p><b>Technical Assistance</b></p> <p><input type="checkbox"/> <b>Interview</b> Name: _____ Date: _____</p> <p><input type="checkbox"/> <b>Administrator</b> Name: _____ Date: _____</p> <p>Please identify what is needed to enhance the quality of your program.</p>	
<p><b>General Comments:</b></p>		

# Classification of Instructional Programs (CIP) Self Review 2008-2013 for Michigan Secondary Career and Technical Education (CTE) State Approved Program

**\*\*REQUIRED PAGE\*\*** I certify that the attached program review is accurate. Evidence to substantiate the above review is available and can be reviewed upon request.

<b>BUILDING CTE ADMINISTRATOR'S OR DESIGNEE SIGNATURE</b>					
<b>BUILDING CTE ADMINISTRATOR'S OR DESIGNEE PRINTED OR TYPED NAME</b>				<b>TITLE</b>	
<b>MAILING ADDRESS</b>				<b>PHYSICAL ADDRESS</b>	
<b>CITY</b>		<b>STATE</b> MICHIGAN	<b>ZIP CODE</b>	<b>CITY</b>	
				MICHIGAN	
<b>PHONE NUMBER</b>	<b>EXT.</b>	<b>FAX NUMBER</b>		<b>E-MAIL ADDRESS</b>	

<b>PRIMARY TEACHER'S SIGNATURE</b>					
<b>PRIMARY TEACHER'S PRINTED OR TYPED NAME</b>				<b>TITLE</b>	
<b>MAILING ADDRESS</b>				<b>PHYSICAL ADDRESS</b>	
<b>CITY</b>		<b>STATE</b> MICHIGAN	<b>ZIP CODE</b>	<b>CITY</b>	
				MICHIGAN	
<b>PHONE NUMBER</b>	<b>EXT.</b>	<b>FAX NUMBER</b>		<b>E-MAIL ADDRESS</b>	

**Page may be duplicated for additional teachers in program**

<b>BUSINESS &amp; INDUSTRY ADVISORY COMMITTEE CHAIR SIGNATURE</b>					
<b>BUSINESS &amp; INDUSTRY ADVISORY COMMITTEE CHAIR PRINTED OR TYPED NAME</b>				<b>TITLE OR BUSINESS AFFILIATION</b>	
<b>MAILING ADDRESS</b>				<b>PHYSICAL ADDRESS</b>	
<b>CITY</b>		<b>STATE</b>	<b>ZIP CODE</b>	<b>CITY</b>	
<b>PHONE NUMBER</b>	<b>EXT.</b>	<b>FAX NUMBER</b>		<b>E-MAIL ADDRESS</b>	

<b>ADMINISTRATOR INITIALS INDICATING ANNUAL REVIEW:</b>					
2008 _____	2009 _____	2010 _____	2011 _____	2012 _____	2013 _____