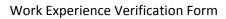


Instructional Technology Teacher (ITT) K-12

Applicant			
Leg	gal name: Da	ate:	
	Requirements		
experie Evaluat listed in person	Applicant for Instructional Technology Teacher Endorsement mence in the categories listed below. Additional descriptors for the ion Worksheet. The applicant should provide documented evicenthis evaluation form. This evidence does not need to be submesting your evaluation form. Note: A maximum of 6 semester rision factor: 45 work clock hours = 1 semester hour).	nese categories are listed on the dence to supporting the work experience nitted to CDE, but may be helpful for the	
1. T e	chnology Operations and Concepts (not documented through	this form)	
N	anning and Designing Learning Environments and Experiences umber of equivalent semester hours: ief Summary of Work Experience Applied for this Category:		
N	eaching, Learning, and Curriculum umber of equivalent semester hours: ief Summary of Work Experience Applied for this Category:		
N	ssessment and Evaluation umber of equivalent semester hours: ief Summary of Work Experience Applied for this Category:		
N	oductivity and Professional Practice umber of equivalent semester hours: ief Summary of Work Experience Applied for this Category:		

11-12 Page 1 of 2

Note: For categories 2-6, the Required Signatures are on page 2 of this form





Social, Ethical, Legal, and F Number of equivalent sem		
•	perience Applied for this Category:	
 I certify that the inform categories is correct. 	ation listing my relevant work experience in each	of the above mentioned
Ç		
Applicant's Printed Name	Applicant's Signature	 Date
Applicant 5 Timeed Name	Applicant 5 5.8. later C	Jute
☐ As signing authority, I co	ertify that the applicant has the work experience	listed on this evaluation for
Printed Name	Signature	Date
Position	Organization/School/Agency	
Address		
 Phone		

11-12 Page 2 of 2