

Regional Career Pathway/Program of Study (POS) Agreement

Pathway Cluster:	Effective Dates:
Pathway:	Recognized Post-Secondary Credential:
Region:	District/School:
CTE Director(s):	Phone:
Email:	

Career Pathways show students a direct connection between doing well in high school and being able to transition smoothly to postsecondary opportunities or getting a good job when they graduate. Students who focus on a Career Pathway acquire the skills necessary for entry into well-paid careers with high potential for rapid financial growth, increased levels of responsibility, and a high degree of personal satisfaction.

Assurances: This agreement is in effect only when all criteria and conditions of the Career Pathways Program have been met.

A. The purpose of the pathway is to lead students to high wage, high skill, and/or in-demand careers.

Region Pathway Criteria:

- A. A seamless transition from middle to secondary to postsecondary education with entry and exits points available.
- B. Pathway must include middle grade courses, exploratory courses, academic supporting courses, at least one concentrator course, and at least one completer course.
- C. Pathway must be region industry driven.
- D. Pathway must not duplicate or minimize any USBE approved pathway.
- E. Dual and concurrent enrollment and other credit transfer options are well defined between secondary and postsecondary partners.
- F. Pathway must meet minimum requirements to allow a student to complete the pathway. Secondary Pathway must be completed during grades 9-12 .
- G. Pathway must incorporate credentialing through end of course skill or industry certification.
- H. Demonstrate availability of work-based learning experience aligned to the pathway.

	Credit/ Hours	USBE Core Code	USBE Course Name	Credential of Value
Middle School				
Exploratory				
Concentrator				
Completer				

Post-Secondary				

Signatures:		
CTE Director Name:	Industry Partner Representative Name:	Organization:
CTE Director Signature:	Industry Partner Representative Signature:	
CTE Director Name:	Post-Secondary Representative Name:	Organization:
CTE Director Signature:	Post-Secondary Representative Signature:	
USBE Specialist Name:	State CTE Director:	
USBE Specialist Signature:	State CTE Director Signature:	

Please return completed applications to Jonathan Frey at: jonathan.frey@schools.utah.gov.