

INSTRUCTIONAL COACHING ENDORSEMENT

Application for the Utah State Board of Education

APPLICANT INFORMATION

Name: _____ CACTUS ID#: _____

E-mail: _____

PURPOSE

This [endorsement](#), when attached to a current Educator License, verifies that the individual has the skills and knowledge necessary to facilitate effective, job-embedded professional learning to improve educator practice and positively impact student outcomes.

ENDORSEMENT REQUIREMENT AREAS

PREREQUISITES: I have met ALL of the following requirements and provided the [HR Experience Prerequisite Form](#):

- At least 5 years of classroom teaching
- Experience as an instructional coach or teacher leader
- Experience providing instruction or professional learning to adult learners
- At least 3 consecutive years of educator evaluations of “effective” or higher
- At least 1 year of full-time employment in the Utah education system

Which of the following requirement areas did you complete? *Only one demonstration of competency needed per requirement area.* Note that only approved University Courses are eligible for the indicated path below. The list of approved courses can be [found here](#).

1. Foundations of Instructional Coaching

- Approved University Course*

University: _____ Course code: _____

Course name: _____ Semester/Year: _____ Grade: _____

- Approved District/Charter course*

District/Charter: _____ Grade: _____

Date completed and posted in MIDAS: _____

- [Foundations of Instructional Coaching Microcredential Stack](#)

Date completed and posted in MIDAS: _____

2. Adult Learning Theory

- Approved University Course*

University: _____ Course code: _____

Course name: _____ Semester/Year: _____ Grade: _____

- Approved District/Charter course*

District/Charter: _____ Grade: _____

Date completed and posted in MIDAS: _____

- [Adult Learning Theory Microcredential Stack](#)

Date completed and posted in MIDAS: _____

3. Instructional Design and Assessment

- Approved University Course*

University: _____ Course code: _____

Course name: _____ Semester/Year: _____ Grade: _____

- Approved District/Charter course*

District/Charter: _____ Grade: _____

Date completed and posted in MIDAS: _____

- [Instructional Design and Assessment Microcredential Stack](#)

Date completed and posted in MIDAS: _____

- National Board Certification*

Date completed: _____

4. Strategies for Effective Instructional Delivery

- [High-Leverage Practices Microcredential Stack](#)

Date completed and posted in MIDAS: _____

- National Board Certification*

Date completed: _____

- [Area 4 Competency Rubric](#) Signed by Supervisor

Date signed: _____

5. Effective Leadership and Collaboration

- [Teacher Leader Microcredential Stack](#)

Date completed and posted in MIDAS: _____

- Utah Teacher Fellow Membership – Hope Street Group*

Dates of fellowship: _____

- [Area 5 Interview and Competency Rubric](#) Signed by Supervisor

Date signed: _____

APPLICANT'S SIGNATURE

I certify that the information contained in this application is true.

- I have submitted any required documentation such as original transcripts, certifications, MIDAS transcripts, etc.
- Electronic transcripts must be sent directly from the College/University clearinghouse to the USBE Licensing Department at transcripts@schools.utah.gov.

Educator Signature: _____ **Date:** _____

**Submit Completed Application & Attachments
on the USBE SM Apply site:**

<https://usbelicensing.smapply.us/>