ADVANCED PROFESSIONAL ENDORSEMENT RECOMMENDATION – IN STATE/OUT OF STATE

RECOMMENDATION FOR IDAHO INSTRUCTIONAL OR PUPIL SERVICE STAFF WITH SOME OUT OF STATE EXPERIENCE

Applicant's Full Legal Name	Maiden/Former Name
EDUID#	Date of Birth

I certify that the above-named applicant has met all the following criteria for an in state/out of state Advanced Professional Endorsement:

- Applicant has held an instructional or pupil service staff certificate and been employed in a public or accredited private school in a compact member state for nine (9) years or more, of which no more than seven (7) years occurred in an Idaho public/accredited private school. Certificated out of state employment must have occurred in a compact member state.
- Applicant's CLDS Data confirms that Professional Compensation Rung Performance Criteria are met: an
 overall rating of proficient or higher, with no components rated as unsatisfactory on the state framework
 for teaching evaluation; and the majority of applicant's students have met their measurable student
 achievement targets or student success indicator targets.
 - o <u>If the applicant has one (1) to three (3) years of Idaho evaluations in the Career Ladder Data System (CLDS):</u> Applicant met the professional compensation rung performance criteria in all years.
 - If the applicant has four (4) years of Idaho evaluations in CLDS: Applicant met the professional compensation rung performance criteria in three (3) of the four (4) previous years, including the fourth year.
 - If the applicant has five (5) or more years of Idaho evaluations in CLDS: Applicant met the professional compensation rung performance criteria in four (4) of the five (5) previous years, or the third, fourth, and fifth year.
- Applicant's CLDS data confirms that Advanced Professional Compensation Rung Performance Criteria are
 met: an overall rating of proficient or higher, no components rated as unsatisfactory or basic, and rated as
 distinguished overall in Domain II Classroom Environment or Domain III Instruction and Use of
 Assessment on the state framework for teaching evaluation; and seventy-five percent (75%) or more of
 applicant's students have met their measurable student achievement targets or student success indicator
 targets.
 - o <u>If the applicant has one (1) to three (3) years of Idaho evaluations in CLDS</u>: Applicant met the advanced professional compensation rung performance criteria in all years.
 - If the applicant has four (4) years of Idaho evaluations in CLDS: Applicant met the advanced professional compensation rung performance criteria in three (3) of the four (4) previous years, including the fourth year.
 - o <u>If the applicant has five (5) or more years of Idaho evaluations in CLDS:</u> Applicant met the advanced professional compensation rung performance criteria in three (3) of the five (5) previous years, or the third, fourth, and fifth year.

- During 3 of the 5 previous years, applicant has served in an additional building or district leadership role in an Idaho public school.
 - o <u>If the applicant has one (1) to three (3) years of Idaho evaluations in CLDS</u>: Applicant served in an additional building or district leadership role in their school in all years.
 - o <u>If the applicant has four (4) years of Idaho evaluations in CLDS</u>: Applicant served in an additional building or district leadership role in their school in three (3) of the four (4) previous years.
 - If the applicant has five (5) or more years of Idaho evaluations in CLDS: Applicant served in an additional building or district leadership role in their school in three (3) of the five (5) previous years.
- Applicant has an individualized professional learning plan developed with their district/charter supervisor.

I certify that the following required documentation is submitted with this recommendation form:

- Certificated Professional Experience Reports completed and signed by the applicant's prior, out-of-state employer(s).
- Out-of-state certificate copy/copies or educator certificate search results from out of state certificating body/bodies.

I recommend the above-named applicant to receive the Advanced P	rofessional Endorsement with
effective date of <u>July 1, .</u>	
Name of Idaha Sahad District /Charter	District /Charter Number
Name of Idaho School District/Charter	District/Charter Number
Idaho Superintendent/Charter Administrator/Designee Signature	Date

Email completed form to: professionalendorsements@sde.idaho.gov

Questions? Call 208-332-6879