Notification of Changes To Secondary Career and Technical Education Course Offering(s)

1. School

School # 5307	School Name Perry Meridian High School
Corp # 5340	School Corporation Name Perry Township Schools

2. Area CTE District

Member of Area CTE District? No _X_ Yes		
Area CTE District #	37	
Area CTE District Name	Central Nine Career Center	

3. Anticipated Start Date: ______ July 29, 2014_____

4. Course Titles to be added or removed:

Add/	IDOE	IDOE Course Title (state-approved	Indiana College & Career Pathway(s)	
Remove	Course #	course titles required)	in which course will be used	
Add	5408	Education Professions I		

5. Teacher(s):

Course #	Teacher Last Name	First Name	MI	Teacher License #
5408	Bellinger	Sarah		1017355

6. The applicant assures:

- a. The course/program is available to all students of legal age.
- b. Compliance with all rules, policies and regulations governing Career & Technical Education.
- c. An advisory board for this program is established and meets at least annually to ensure that:
 - a. State standards for each course have been reviewed and are in compliance,
 - b. Resources (including facilities, equipment, software, etc.) are appropriate, and
 - c. Curriculum and assessment strategies are appropriate.

7. Verification of approval to add/remove CTE courses:

- Attach minutes of the school board or Area CTE District governing board/meeting in which the addition/removal of CTE course(s) was approved, <u>or</u>
- Provide the names and signatures of the members of the governing board verifying that that the addition/removal of the CTE courses was approved by the governing board.

8. Required signature(s):

By my signature below, I verify that the Governing/Management Board has approved the addition or		
removal of the CTE courses listed in this document and that the assurances listed above will be met:		
Governing Board Chair Name: Bill Maschmeyer, President, Central Nine Governing Board		
Signature	Date:	
E-mail: maschmeyerb@franklinschools.org	Phone: 317-888-4401	

9. Contact information:

Name	Position		
E-mail	Phone		
Mailing address			
City	ST	Zip-Code	