Adding new Course

*NEW PROGRAM APPLICATION

Prior to offering a class for credit or receiving state reimbursement for a vocational program it must appear on the approved course list. If it is listed in the State Board of Education Approved Course and Program Descriptions for Indiana schools, but not on your school’s *approved list, you will have to complete an “Application to offer a New Secondary Vocational Program.” Beginning January 1, 2005, the attached forms will be used.

Process for local approval:

Identify the program area of interest.

• Determine if it is not on your approved course list.
• Create an advisory committee for the program area and determine need for the program, including sending school support, no similar programs offered in district, student interest, and financial resources available to start the program.
• Complete the “Application to offer a New Secondary Vocational Program” and “Notification of a New Secondary Vocational Program.”
• Secure local board approval.
• Send to district governing board (area vocational district in most cases) for approval.
• Once approved, the district governing board will send copies of the “Notification of a New Secondary Vocational Program” to the Indiana Department of Education and the Department of Workforce Development.

Send to:

Patty Shutt, Director
Office of Career and Technical Education
Indiana Department of Education
229 State House
Indianapolis, IN 46204

Chris Deaton
Department of Workforce Development
10 N. Senate Ave.
Indianapolis, IN 46202
**Application to offer a New Secondary Vocational Program**

1. LEA Name: East Allen County Schools
2. LEA Number: 0255

3. School Name: 
4. School Number: 

5. District Governing Board/Area Vocational District Name: Anthis Career Center
6. District Governing Board/Area Vocational District Number: AVD 14 Region 3

7. County: Allen
8. Anticipated Start Date: 

9. New Program Cluster

| Agriculture, Food & Natural Resources | Hospitality and Tourism |
| Architecture & Construction | Human Services |
| Arts, A/V Technology & Communications | Information Technology |
| Business, Management & Administration | Law, Public Safety, Corrections & Security |
| Education & Training | Manufacturing |
| Finance | Marketing, Sales & Service |
| Government & Public Administration | Science, Technology, Engineering & Mathematics |
| Health Science | Transportation, Distribution & Logistics |

10. CIP Code Number: 

11. DOE Course Title and Number: 
12. Number of credits per year: 

13. Teacher(s) for this Program:

<table>
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<tr>
<th>Last Name</th>
<th>First Name</th>
<th>MI</th>
<th>Teacher Certification (License) Number</th>
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14. Date of Local Governing Board/Area Vocational District Board Approval to Operate Program:

Local Governing Board Director’s Name: (Print or type) ________________________________
Signature ________________________________ Date __________________


1. Complete blocks 1-14 of “Application to offer a New Secondary Vocational Program” form (attached)
2. The Applicant assures that:
   a. The course/program is available to all students of legal age
      (Indiana Code 20-10. 1-6-6)
   b. Compliance will occur with all rules, policies and regulation governing career & Technical Education
   c. An advisory board is established and active (attach membership list and minutes), ensuring:
      1. State standards specific to this course/program have been reviewed and are in compliance
      2. Resources (including facilities, equipment, software, etc.) are Appropriate
      3. Curriculum and assessment strategies are appropriate
   d. Regular advisory board meetings will occur at least annually to ensure continued compliance with 1-3 above

________________________________________
Signature

________________________________________
Date

Printed name of applicant’s representative: ________________________________

Contact information of Applicant:

Phone ____________________________

Mailing Address: ________________________________

_____________________________________

Email Address: ________________________________
Governing Board/Area Vocational District Board:

☐ Approve

☐ Disapprove

Governing Board/AVD Board President Signature_______________________________

Date_______________