Virginia Department of Education  
APPLICATION FOR NEW CAREER AND TECHNICAL EDUCATION (CTE) PROGRAM/COURSE

Revised October 1, 2022

School Division:

Date:

## DIRECTIONS/PROCEDURES

1. Prior to implementing a new CTE program/course, the following information must be submitted by fax at 804-530-4560 or email to [CTE@doe.virginia.gov](http://doe.virginia.gov/instruction/lkr19954/AppData/Local/Microsoft/jspencer$/WORD/CTEMS/2012-2013/CTE@doe.virginia.gov).
2. Complete a separate application for each new program/course.
3. Contact the VDOE CTE cluster/program specialist for assistance as needed.

### CONTENT AREA

* + - Agricultural Education
    - Business and Information Technology
    - Family and Consumer Sciences
    - Health and Medical Sciences
    - Marketing
    - Technology Education
    - Trade and Industrial Education
    - Career Connections
    - Military Science (all Military Branches)
    - Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### PROGRAM/COURSE INFORMATION

### Note: Use the state approved course title and codes as they appear in the [CTERS User’s Manual](http://www.doe.virginia.gov/info_management/data_collection/instruction/career_tech/cters/users-manual.docx).

#### Program/Course identification:

* Title:
* SCED Code:
* Extended Description(s):
* Assignment Code(s):
* Length of course (6, 9, 12, 18, or 36-weeks):
* Grade level(s) to be served:
* Date of implementation:
* School(s)/facility where offered:

**Note: If the above program/course is dual enrolled and/or offered in conjunction with a college or university, please attach the articulation agreement and/or letter of support from the college or university.**

#### CTE administration personnel responsible for administering the program:

* Name:
* Title:
* Phone:
* Email Address:

#### Will teacher have the correct endorsement for the program/course?

* Yes  Endorsement Code
* No

**Note: If no, contact the CTE cluster/program area specialist before proceeding to complete application.**

#### Will the program/course follow the guidelines in the [[CTERS User’s Manual](http://www.doe.virginia.gov/info_management/data_collection/instruction/career_tech/cters/users-manual.docx).](http://www.cteresource.org/apg)

#### **If no, describe changes/additions.**

* Yes
* No  Why?

#### Competency Based Education (CBE) is a requirement. Will you use the state course outlines and/or recommended competencies for this program/course?

#### **If no, describe modifications.**

* Yes
* No  Why?

#### Data on student interest for this program/course must be provided.

**Note: This should be a survey of students in grades 7 through 11 administered within the prior twelve-month period. The survey may also include grade 6. Submit a blank survey form and detailed summary report of students’ survey responses with this application.**

#### A concentration is a coherent sequence of state-approved courses equivalent to two 36-week courses as listed on each CTE curriculum framework located within the Career Clusters tab on the CTE Resource Center [website](https://www.cteresource.org/). **If this is a middle school course, proceed to item H.**

##### G.1. Reference the concentration sequence identified in the course sequence using the CTE Resource Center [website](https://www.cteresource.org/). Which course(s) in the concentration sequence do you currently offer? List the course title, SCED code, extended description, and assignment code for each course below:

* Concentration Sequence
* Title:
* SCED Code:
* Extended Description:
* Assignment Code:
* Concentration Sequence
* Title:
* SCED Code:
* Extended Description:
* Assignment Code:
* Concentration Sequence
* Title:
* SCED Code:
* Extended Description:
* Assignment Code:

##### G.2. If you do not currently offer any courses in the concentration sequence, indicate the school year the additional course(s) will be offered followed by the course title, SCED code, extended description, and assignment code.

* Concentration Sequence
* Implementation Year:
* Title:
* SCED Code:
* Extended Description:
* Assignment Code:
* Concentration Sequence
* Implementation Year:
* Title:
* SCED Code:
* Extended Description:
* Assignment Code:
* Concentration Sequence
* Implementation Year:
* Title:
* SCED Code:
* Extended Description:
* Assignment Code:

#### Labor market/employment needs data:

##### H.1. Complete the Labor Market/Employment Data table for your Local Workforce Development Area (LWDA) using the CTE Trailblazers [website](https://ctetrailblazers.org/labor-market-data/). These interactive pages allow access to all the information needed to fill out the new course application by scrolling and hovering over items to view more information.

##### a. Local Workforce Development Area (LWDA)

##### 

##### Supply the following information for three to five occupations related to the proposed new program/course request. Consider a variety of occupations across multiple clusters and pathways with high growth and high demand rates that supports the addition of the new program/course. Also, consider occupations related to identified courses in the concentration sequence.

**Labor Market/Employment Data**

| **1. Local Workforce Development Area** [**(LWDA)**](https://ctetrailblazers.org/labor-market-data/)  **LWDA Area** | **2. Most recent 10-year projection percent for rate of employment growth (LWDA)** | **3. Most recent 10-year projection for number of new jobs (LWDA)** | **4. Most recent 10-year projection percent for rate of employment growth (Commonwealth)** | **5. Most recent 10-year projection percent for employment change (National)** | **6. Most recent 10-year projection percent for rate of employment growth across all occupations (LWDA)** | **7. Most recent 10-year projection percent for rate of employment growth across all occupations (Commonwealth)** |
| --- | --- | --- | --- | --- | --- | --- |
| CTE Career Cluster:    CTE Career Pathway:    Occupation: |  |  |  |  |  |  |
| CTE Career Cluster:    CTE Career Pathway:    Occupation: |  |  |  |  |  |  |
| CTE Career Cluster:    CTE Career Pathway:    Occupation: |  |  |  |  |  |  |
| CTE Career Cluster:    CTE Career Pathway:    Occupation: |  |  |  |  |  |  |
| CTE Career Cluster:    CTE Career Pathway:    Occupation: |  |  |  |  |  |  |

b. Sometimes, a low rate of growth may still amount to a reasonably large number of jobs. Do you see evidence for a large volume of new jobs supported by this course? Reference Column 3 on the Labor Market/Employment Data table.

* Yes
* No

1. Divisions prepare students for state and national competitiveness. Do the growth rates found in Columns 4 or 5 on the Labor Market/Employment Data table demonstrate that the careers supported by the course are expected to see rapid growth at the state or national level?

* Yes
* No

##### H.2. Address the following questions to justify why this course should be approved.

1. Does the projected rate of growth for most of the occupation(s) you have identified exceed the rate of growth for all occupations in your LWDA? (compare Column 2 to Column 6 in your LWDA)

* Yes
* No

| **Occupations** | **Data from Column 2 in table H.1** | **Data from Column 6 in table H.1** | **Difference (Column 2 - Column 6)** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. Does the projected rate of growth for most of the occupations you have identified exceed the rate of employment growth for the overall pathway in the Commonwealth? (compare Column 2 to Column 7)

* Yes
* No

| **Occupations** | **Data from Column 2 in table H.1** | **Data from Column 7 in table H.1** | **Difference (Column 2 - Column 7)** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. Is there evidence that new industry openings in your area will hire for the skills taught in the proposed course? If so, please attach printed evidence that new industries have recently opened or will be opening soon that will hire for those skills. Resources to help with this might include local newspapers, Chambers of Commerce, Virginia Economic Development regional profiles, and media outlets. Please attach the printed announcement to the application packet.

***The school division assures that the program/course will operate consistently with the requirements of current Career and Technical Education Regulations and Virginia Standards of Quality.***

**Division CTE Director (Signature) Date**                                   

**Division Superintendent (Signature) Date**



## FOR STATE USE ONLY

This application for a new program/course is approved consistent with the requirements of the Career and Technical Education State Regulations, Standards of Accreditation, and Standards of Quality.

**REVIEWED BY:**

**Cluster/Program Specialist (Signature) Date**

**APPROVED BY:**

**State Director/Designee (Signature) Date**