



Greetings from the Professional Educator Licensing and Standard Board!

PELSB is seeking qualified professionals to serve as reviewers for teacher preparation program applications.

PELSB approves all teacher licensure programs in the state. When a teacher preparation provider proposes to start a new program, it must submit a Request for Initial Program Approval (RIPA). To ensure these are high quality programs, meet Minnesota state standards for pedagogy and content, and incorporate all statutory requirements, we rely on external experts (peer reviewers) in the content of each application.

We are seeking qualified professionals to partner with us in the review of the program applications, including classroom teachers and teacher educators. Both classroom teachers and teacher educators must meet the requirements for a methods instructor for the content areas reviewed. Individuals granted a discretionary variance to be a methods instructor may be considered.

If selected as a reviewer, PELSB will provide training and supporting documents. As programs are ready for review in your content area, you may be contacted. Reviews are completed entirely online with a co-reviewer and are expected to be reviewed within one month.

Thank you for your consideration of partnering with us in this critically important work! Application forms follow.

Michelle Sandler

Teacher Education Specialist
Minnesota Professional Educator Licensing and Standards Board

APPLICATION FOR PROGRAM REVIEWERS

Please fill out all sections, if not applicable please write "NA."

| | |
|---|---|
| Your Name: | |
| Preferred email address: | |
| Preferred phone number: | |
| 6-digit file folder number: | Note: Please use the License Look-Up function on the Educator Licensing webpage if you do not know your file folder number. |
| MN license(s) held: | |
| License(s) held from other states (if applicable): | |
| Identify the content areas in which you have advanced academic preparation/degrees | |
| Current employer: | |
| Current title / role: | |
| Relevant employment and/or experiences: | |

APPLICATION FOR PROGRAM REVIEWERS

PROFESSIONAL EDUCATOR AND LICENSING AND STANDARDS BOARD PROGRAM REVIEW

Please carefully review these qualifications prior to submitting an application to be sure that you are eligible to be considered as a reviewer.

To be “qualified” to review a specific licensure area you must:

- 1) *Have advanced academic preparation in the specific subject. This means an advanced academic degree with targeted study and preparation specific to the content of the licensure field(s)*
- 2) *Have classroom teaching experience in the licensure area*

| Licensure area | Indicate which areas you are qualified to review by inserting a “YES” next to the licensure program. | Indicate the number of school years you have taught P-12 grade learners in each of these subject areas |
|--|--|--|
| Business Education | | |
| Communication Arts/Lit | | |
| Early Childhood | | |
| Elementary Education | | |
| Physical Education | | |
| Health Education | | |
| Mathematics | | |
| Science: Chemistry | | |
| Science: Earth/Space | | |
| Science: General | | |
| Science: Life | | |
| Science: Physics | | |
| Social Studies | | |
| Music: Vocal or Instrumental | | |
| Visual Arts | | |
| World Languages | | |
| SpEd: Blind or Visually Impaired | | |
| SpEd: Deaf or Hard of Hearing | | |
| SpEd: Oral/Aural Deaf Education | | |
| SpEd: Developmental Adapted Phys Ed | | |
| SpEd: Developmental Disabilities | | |
| SpEd: Early Childhood SpEd | | |
| SpEd: Emotional or Behavioral Disorders | | |
| SpEd: Learning Disabilities | | |
| SpEd: Physical and Health Disabilities | | |
| SpEd: Academic and Behavioral Strategist | | |
| SpEd: Autism Spectrum Disorders | | |
| Other Licensure Area: _____ | | |

REVIEWER'S DECLARATION

- 1. I agree to serve on this review. *Initial:* _____
- 2. I agree that my review will be conducted in a fair and objective manner. *Initial:* _____
- 3. I understand the need for confidentiality. During the review process, I will not disclose Board of Teaching data that is protected from disclosure under the Minnesota Government Data Practices Act, Minnesota Statutes, Chapter 13 ("Confidential Data"). I will maintain the confidentiality after I have completed my review. I will contact a PELSB Teacher Education Specialist if I have any questions or receive any requests for disclosure of PELSB data. *Initial:* _____
- 4. I certify that neither I nor any member of my family has a material, personal, or financial relationship with the institution that has submitted the program that I will review. Furthermore, I am documenting any current areas where I may have a conflict of interest on the lines below. If new conflicts of interest arise, I will communicate that conflict with PELSB Teacher Education Specialist. *Initial:* _____

List all the institutions where you may have conflicts of interests or perceived conflicts of interest below.

- a. Current or former faculty, adjunct faculty/teacher educator at the following institutions/preparation providers: _____
- b. Current or former student of the following institution/prep providers:

- c. Current or former member of an advisory body of the following institutions/preparation providers:

- d. Current or former consultant at the following institutions/preparation providers:

- e. Other perceived conflicts, such as a family member who is a student or employee at the following institutions/preparation providers:

Signature: _____ **Date:** _____

Please return to Michelle Sandler.
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