`

MINNESOTA
PROFESSIONAL EDUCATOR
LICENSING AND STANDARDS BOARD

Greetings from the Professional Educator Licensing and Standards Board (PELSB)!

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

PELSB approves all teacher licensure programs in Minnesota. When a teacher preparation provider proposes a new program, it must submit a Request for Initial Program Approval (RIPA). To ensure these programs are high quality, meet Minnesota's pedagogical and content standards, and comply with all statutory requirements, PELSB relies on external experts—peer reviewers—with content-area expertise to review each application.

We are seeking qualified professionals, including classroom teachers and teacher educators, to partner with us in reviewing program applications. Reviewers must demonstrate both subject-matter expertise and teaching experience in the licensure area.

If selected, reviewers will receive training and supporting materials from PELSB. As applications become available in your content area, you may be contacted to participate in a review. Reviews are completed entirely online, in collaboration with a co-reviewer, and are typically expected to be completed within one month.

Thank you for considering partnering with us in this critically important work.

Sincerely,

Minnesota Professional Educator Licensing & Standards Board Team

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 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, experiences, certifications, awards:

EDUCATOR LICENSING AND STANDARDS BOARD – PROGRAM REVIEW

Please carefully review the qualifications below before applying to ensure you are eligible to serve as a reviewer.

To be considered **qualified** to review a specific licensure area, you must:

1. Have content expertise in the specific subject area (preferred: 18 graduate credits in the content, dissertation or published peer-reviewed research in the area of instruction); and
2. Have classroom teaching experience in that licensure area (3 years preferred).

Licensure area	**Indicate which areas you are qualified to review by placing a "YES" next to each licensure program.**	**Indicate the number of school years you have taught P–12 learners in each of the following subject areas.**
Business Education		
Communication Arts/Lit		
Early Childhood		
Elementary Education		
English as a Second Language		
Physical Education		
Health Education		
Dance		
Developmental Adapted Phys Ed		
Library Media Specialist		
Mathematics		
Reading		

Science: Chemistry		
Science: Earth/Space		
Science: General (5-8)		
Science: Life		
Science: Physics		
Social Studies		
Music: Vocal or Instrumental and Classroom		
Visual Arts		
World Languages:		
SpEd: Academic and Behavioral Strategist		
SpEd: Deaf or Hard of Hearing		
SpEd: Developmental Disabilities		
SpEd: Early Childhood SpEd		
SpEd: Emotional or Behavioral Disorders		
SpEd: Learning Disabilities		
SpEd: Physical and Health Disabilities		
SpEd: Autism Spectrum Disorders		
Technology		
Theatre		
Career and Technical Education:		
Ethnic Studies		
Computer Science		
Standards of Effective Practice		
Other Licensure Area:		

REVIEWER'S DECLARATION

1. I agree to serve as a reviewer for this review. **Initial: _____**

2. I agree to conduct my review fairly and objectively. **Initial: _____**

3. I understand and agree to maintain confidentiality. During the review process, I will not disclose PELSB data that is protected under the Minnesota Government Data Practices Act, Minnesota Statutes, Chapter 13 ("Confidential Data"). I will continue to maintain this confidentiality after completing my review. If I have any questions or receive any requests for the disclosure of PELSB data, I will contact a PELSB Teacher Education Specialist**. Initial: _____**

4. I certify that neither I nor any member of my immediate family has a material, personal, or financial relationship with the institution that submitted the program under review. I will document any current or potential conflicts of interest below. If any new conflicts arise, I will promptly notify a PELSB Teacher Education Specialist**. Initial: _____**

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

a. Current or former faculty member or adjunct faculty at the following institutions:

   _____

b. Current or former student of the following institutions:

   _____

c. Current or former member of an advisory body of the following institutions:

   _____

d. Current or former consultant at the following institutions:

   _____

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

Signature: ____ Date: __________________