



# Utah State Board of Education

## Alternate Pathway to Professional Educator License (APPEL) Professional License Plan (PLP) Checklist for Deaf Education License

Name: \_\_\_\_\_ CACTUS ID: \_\_\_\_\_

Date Admitted Into Program: \_\_\_\_\_

Date PLP Created/Established: \_\_\_\_\_

### Initial Evaluation:

Original Transcript Received

Transcript reviewer (name): \_\_\_\_\_ Date: \_\_\_\_\_

Date of Initial Consultation with Candidate: \_\_\_\_\_

Bachelor's degree major: \_\_\_\_\_ Date conferred: \_\_\_\_\_

### Progress Evaluations:

Date(s) of additional consultation(s) with Candidate: \_\_\_\_\_

### Notes from Progress Meetings:

Assigned Mentor-Educator: \_\_\_\_\_

### Associate Educator License (AEL):

AEL Expiration Date: \_\_\_\_\_

AEL License Area: \_\_\_\_\_

Endorsement(s): \_\_\_\_\_



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### Administrative UETS (Utah Effective Teaching Standards) Evaluations:

The candidate is to be evaluated two (2) times each year. Evaluations need to be accessible to Utah State Board of Education (USBE) staff when the APPEL program is reviewed.

#### Year 1:

Date Evaluated: \_\_\_\_\_ Administrator's Name: \_\_\_\_\_  
Date Evaluated: \_\_\_\_\_ Administrator's Name: \_\_\_\_\_

#### Year 2:

Date Evaluated: \_\_\_\_\_ Administrator's Name: \_\_\_\_\_  
Date Evaluated: \_\_\_\_\_ Administrator's Name: \_\_\_\_\_

#### Year 3:

Date Evaluated: \_\_\_\_\_ Administrator's Name: \_\_\_\_\_  
Date Evaluated: \_\_\_\_\_ Administrator's Name: \_\_\_\_\_

### Educator Competencies:

#### General Teacher Competencies

Learners and Learning  
Instructional Clarity  
Instructional Practice  
Classroom Climate  
Professional Responsibility

#### Course Title/Description

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

#### Deaf Ed Knowledge & Pedagogy

#### Course Title/Description



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Learner Development & Individual Learning Differences	<input type="checkbox"/>	
Learning Environments	<input type="checkbox"/>	
Curricular Content Knowledge	<input type="checkbox"/>	
Assessment	<input type="checkbox"/>	
Instructional Planning & Strategies	<input type="checkbox"/>	
Professional Learning & Ethical Practice	<input type="checkbox"/>	
Collaboration	<input type="checkbox"/>	
Legal Issues	<input type="checkbox"/>	
Behavior Management	<input type="checkbox"/>	

### Endorsement Area (choose ASL/English or LSL):

Met ASL/English Competencies	<input type="checkbox"/>	Course Title/Description	Completed: <input type="checkbox"/>
Met LSL Competencies	<input type="checkbox"/>	Course Title/Description	

### Additional Content Knowledge & Pedagogy

Completed:

For Deaf Education teachers wishing to add another endorsement, all necessary endorsement forms must be included in their file. To access all endorsement forms, please visit the [USBE Licensing & Endorsement website](#). Fill out the respective endorsement form(s) and attach a copy of the form(s) to this PLP.

Completed:

### Demonstration Competencies

- Demonstrate understanding of socio-cultural and psychological implications of hearing



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*loss during interactions with students.*

Description of how competency was met:

- *Demonstrates integration of language instruction in all academic areas.*

Description of how competency was met:

- *Demonstrates skills in implementing strategies for stimulating and using residual hearing*

Description of how competency was met:

- *Demonstrates skills in implementing strategies for developing spoken language in orally communicating students and/or with sign language proficiency in students who sign.*

Description of how competency was met:

- *Demonstrates use of specialized technologies, resources, and instructional strategies unique to students who are deaf and hard of hearing.*



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Description of how competency was met:

- *Demonstrates skills in addressing specific linguistic and cultural needs of deaf and hard-of-hearing students throughout the curriculum.*

Description of how competency was met:

- *Demonstrates skills for incorporating language into all aspects of the curriculum.*

Description of how competency was met:

- *Demonstrates knowledge of Individualized Education Programs (IEPs) by writing and implementing goals aligned to students' academic, communication, socialization, and emotional resilience needs.*

Description of how competency was met:

- *Demonstrate the ability to plan, teach, and use effective universal (Tier 1) behavior support strategies in multiple school settings (e.g., classroom, hallways, playground, lunchroom, etc.) to increase the frequency of positive behavior in deaf and*



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*hard-of-hearing students*

Description of how competency was met:

- *Demonstrate ability to plan, teach, and effectively use Tier 2 & 3 strategies based on data when more intense strategies are required and implement interventions with fidelity.*

Description of how competency was met:

- *Participating in at least one IEP meeting or parental consultation regarding a student whom the program applicant has instructed.*

Description of how competency was met:

- *Demonstrate the ability to distinguish among behavioral, language, and academic difficulties (refusal or inability).*

Description of how competency was met:



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- *(for ASL/English endorsement)* Demonstrates competency in integrating American Sign Language into instruction of core academic content for all school-age students.

Description of how competency was met:

- *(for ASL/English endorsement)* Demonstrates competency in integrating respect and understanding of deaf culture into instructions

Description of how competency was met:

- *(for LSL endorsement)* Demonstrates understanding and expertise regarding early childhood spoken language development.

Description of how competency was met:

### Clinical Observations

Completed:

I verify the candidate was provided release time to observe master educators' classrooms and had opportunities to reflect on these observations with their mentor-teacher and/or evaluator. I have attached supporting documentation of the candidate's reflection of clinical observations.

Signature:

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Date:



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### Educator Dispositions

Completed:

A teacher preparation program shall consider a candidate's dispositions and suitability for teaching, as defined in the UETS ([Utah Effective Teaching Standards](#)) (*see pages 33–36 of the linked document*). Candidate's dispositions for teaching may be evaluated in tandem with formal evaluations or may be evaluated separately. Please attach any supporting documentation of how the candidate's dispositions were evaluated.

I verify the educator has successfully demonstrated the dispositions for teaching as defined in the Utah Effective Teaching Standards (UETS).

Evaluator Signature:

Date:

### Assessments:

#### Deaf Education Praxis

Completed:

DEP Date:

DEP Final Score:

#### ASL Proficiency Interview (ASLPI) (for ASL/English & Birth to 5 D/HH)

Completed:

ASLPI  
Date:

ASLPI Final  
Score:

### Recommendation for Licensure:

#### Professional Licensure Requirements Check:

- *Review and check off all competencies, etc., to ensure the candidate has met all requirements for recommendation.*

### Recommendation Signatures & Dates

Administrator:

Date:



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Mentor-Educator: \_\_\_\_\_ Date: \_\_\_\_\_

Candidate: \_\_\_\_\_ Date: \_\_\_\_\_

Educational Director: \_\_\_\_\_ Date: \_\_\_\_\_

**Recommended for Professional Educator License (PEL)** \_\_\_\_\_ Date: \_\_\_\_\_

**\*Please submit all requests to: [appel@schools.utah.gov](mailto:appel@schools.utah.gov)**

For questions, please contact USBE Licensing via email: [appel@schools.utah.gov](mailto:appel@schools.utah.gov), or phone: (801) 538-7740.

DO NOT ALTER