

## **Attachment C: Sheltered Instruction Qualification Cover Sheet**

Department of Education Office of Talent Management, EQSection P.O. Box 2360 Honolulu, HI 96804

Name:		Emp ID:	School/Office:		
	nly One (1): I am submitting this Cover Sheet for t	he <u>first time</u> .			
	have previously submitted a Cover Sheet and am submitting <u>new or additional</u> documents/information. <i>Do not uttach documents/information previously submitted.</i>				
I am seel	king the Sheltered Instruction Quali	fication through the following Option	n Select Only One (1):		
	<b>Option 1:</b> Completion of Six (6) colluniversity or program. <i>Attach official</i>	ege credits in TESOL-related foundatio transcript (copies acceptable).	onal EL knowledge from an a	accredited college or	
•	<b>Option 2:</b> Completion of two (2) three	ee (3) credit HIDOE-sponsored ESL or	TESOL PDE3 courses.		
]	PDE3 Course Name:	S	Section # & date completed:		
]	PDE3 Course Name:	S	Section # & date completed:		
]		o (72) seat hours of TESOL-related HII in for Audit credit(s), complete the <i>Verif</i>			
	Course or Conference	Course Number & Section	Date of Completion	# of Seat Hours	
	If additional space is required, please	attach a senarate sheet			
		rsement earned from another state. <i>Att</i>	ach Endorsement.		
<u> </u>	Option 5: TESOL HQ or TESOL lice have a TESOL HQ or License. If you Documentation Coversheet, document	ensure status in lieu of 6 credits. You done need to submit documentation to meet to 2a in the ESSA Hawaii Qualified Teach.  Attach your eight (8) stacks of the 12 credits.	o not need to submit addition this requirement, please refuher Handbook.	er to the <u>HQ</u>	
Î	Micro-credential.				
1	knowledge from an accredited college	and 2 above: Completion of Three (3 or university or program, <i>attach officio</i> OL PDE3 courses, provide course infor	al transcript and Completion		
]	PDE3 Course Name:	S	ection # & date completed:		
misrepre		above information is accurately repo tion on this form may result in sanct			
Teacher	Signature:		Date:		
Submissio	on Instructions: Please submit this cover	sheet along with supporting documentation	to the Educator Quality Section	n. <b>Mail</b> : P.O. Box 2360,	

Honolulu, HI 96804 or via HIDOE Courier: OTM, Educator Quality Section or email: hqt@k12.hi.us