# **EdVisions Cooperative-Relicensing**

# **Certification of Summative Evaluation Form**

This form is to be submitted to indicate the completion of English Language Learners and Cultural Competency as indicated in the district Summative Evaluation for named individual.

|  |  |
| --- | --- |
| Name:  | File Folder Number:  |
| Licenses Held: | Expiration Date: |
| Current School:  |

**I hereby certify that the Summative Evaluation System of the above named school, meets the PELSB relicensure requirements related to:**

1. ***Cultural Competency***

***Training must include the following elements in a format fostering self-reflection and***

***discussion where the focus is on deepening the teacher’s own frames of reference, potential bias in these frames, and the impact of these frames on students, students’ families, and the school communities:***

* + ***Racial, cultural, and socioeconomic groups;***
	+ ***American Indian and Alaskan native students;***
	+ ***Religious diversity;***
	+ ***Gender identity, including transgender students;***
	+ ***Sexual orientation;***
	+ ***Language diversity;***
	+ ***Individuals with disabilities and mental health concerns; and***
	+ ***Systemic racism.***
1. ***Meeting the Needs of English Language Learners***

|  |
| --- |
| Name of School Director: |
| Signature:  | Date: |

|  |
| --- |
| **Local Committee Action** |
| Receipt of Certificate of Summative Evaluation | Date: |
| Signature: | Signature: |