EdVisions Cooperative Relicensure Checklist

These are the items you should send the committee:

\_\_\_\_\_\_print out of license found at the MDE website

\_\_\_\_\_\_A Master Records form- filled in with all CEU Certificates being submitted

\_\_\_\_\_Clock hours form with each of the CEU Certificates/Evidence being submitted- fill in explanation of CEU when not obvious on certificate/transcript.

\_\_\_\_125 total hours

\_\_\_\_2 hours ***Further reading preparation***

\_\_\_\_2 hours ***Positive behavior intervention strategies***

\_\_\_\_2 hours ***Key warning signs of early-onset mental illness in children and adolescents, including a minimum of one hour of suicide prevention***

\_\_\_\_ ***Cultural Competency check off all areas (CEUs or Summative Evaluation attached)***

***\_\_\_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.***

\_\_\_\_ ***English Language Learners (CEUs or Summative Evaluation attached)***

\_\_\_\_15 hours in licensure area **OR** 30 hours in licensure area

\_\_\_\_15 hours in TPP and PBL training (if not 30 hours in licensure area)

\_\_\_\_\_ Summative Evaluation or Certificate of Summative Evaluation Form (if needed)

\_\_\_\_\_ Payment to Cooperative if not a member or from a member school

\_\_\_\_\_ Payment to Cooperative if re- licensure requested at non-regular meeting time

**\_\_\_\_I have \_\_\_\_\_\_\_\_\_\_\_\_ hours listed on the MDE website from a previous school site.**