

ESD-U Adding Endorsement (Retooling) Application Expectations & Understanding (24-25)

To confirm that you understand ESD-U program expectations, review and initial each section below.

PROGRAM EXPECTATION	INITIAL
I have reviewed the current ESD-U Candidate Handbook and understand the program expectations for an ESD-U candidate.	
I understand that in addition to submitting this application, the ESD-U admission process includes reference checks, possible interviews, and approval from the school district human resources department. I understand that ESD-U may need to communicate directly with the references I provide and/or district HR staff, and that ESD-U will communicate with me regarding additional items that may be needed.	
I understand that my acceptance into the ESD-U program will be conditional upon a school, district, or other learning institution agreeing to provide me with appropriate access to instructional opportunities to complete the required field experience hours for my route/role. I understand that the ESD-U program will be communicating with school district human resources representatives and building principals about my ESD-U application and may share application materials.	
I understand that I need to complete the required field experience hours for my route/role during the school year while completing the required courses. If I am not currently the lead teacher, I understand that I will likely need to take an unpaid leave of absence from my regular position to complete all or part of my field experience.	
I understand that my acceptance into the ESD-U program will not guarantee employment within a school, district, or other learning institution. I understand that decisions regarding employment are made by the school district human resources department and the ESD-U program is not involved in district hiring processes.	
I understand that I must select a payment plan for my ESD-U program tuition. I understand that regardless of which payment plan I select, the first tuition payment must be paid prior to starting the first required course, and the full tuition amount must be paid before program completion, and prior to being recommended for certification.	
I understand that there will be testing fees and other certification fees in addition to my ESD-U program tuition, and these fees will be paid directly to the agencies involved.	
I understand that unless I receive a competency-based course waiver, I must successfully pass each of the courses listed in the program description before certification can be recommended by ESD-U.	
I understand that attendance is a key component of successfully passing a course and I agree to the following: I will attend and actively participate in all course dates. I will be prepared and on time for all courses. If I have an extreme unavoidable conflict with a course date, I will communicate with ESD-U staff and ESD-U instructors using the appropriate procedures and with as much notice as possible.	



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I understand that I must complete coursework to successfully pass a course and I agree to the following: I will submit all coursework on-time by deadlines provided by the instructor. If needed, I will review feedback from instructors and resubmit coursework in a timely manner. If I have questions regarding coursework, I will communicate with ESD-U instructors and ESD-U staff in a timely manner, with time for appropriate follow-up before a deadline.	
I understand that I will communicate in a timely manner with all ESD-U instructors and ESD-U staff regarding any program item, preferably within 48 business hours.	
I understand that I must be in good standing with ESD-U at the completion of the certification program to be eligible for certification recommendation to the Office of Superintendent of Public Instruction. This means I received a passing grade for each course I am required to take, have completed field experience requirements, and all other program requirements.	
I understand that participating in ESD-U will include using a variety of technology resources, including Zoom, Canvas, Google Suite, Padlet, etc. and that it will be vital for my ongoing success to have access to a stable WIFI connection and reliable devices (laptop, computer, tablet, Chromebook, etc.). I understand that I will need to seek out support from program staff and other available contacts/resources if I need support using any technology. I will contact program staff immediately if access to WIFI or appropriate devices becomes an issue.	

By signing below, you certify under the penalty of perjury under the laws of the State of Washington that you have made true, correct and complete answers and statements on this application in the knowledge that they may be relied upon in considering your application. If the information provided or answer(s) to any questions on the application change prior to your being admitted to the program, you understand that you must immediately notify the ESD-U program. You understand that any omission, falsely answered statement made by you on this application, or any supplement to it will be sufficient grounds for failure to admit you or for your dismissal from the program should you be admitted.

Applicant Full Name (Printed)

Applicant Full Name (Signature)

Date