

**South Carolina Department of Education  
Office of Educator Services  
Educator Preparation**

**Statement of Intent to Submit a New or Modified Educator Preparation Program**

This form is for currently approved providers to notify the South Carolina Department of Education (SCDE) of the intent to submit a new or modified program proposal.

- Providers must have approval from applicable entities (e.g., institutional, Commission on Higher Education, etc.) to propose or modify a program.
- Providers seeking to make changes in eighteen semester hours or less of coursework should contact the SCDE for instructions on submitting a Notification of Change.
- Providers seeking to add a new program should complete this form. New programs are those that add additional certification areas to the provider's offerings, make a change in program structure, or change more than fifty percent of a currently approved program's curriculum.
- Providers seeking to modify currently approved programs should complete this form if there is a change in program or certification area including the addition or deletion of nineteen semester hours or more.
- Providers submitting this form should be aware that the SCDE calculates course hour additions and deletions for new and modified programs cumulatively.
- Providers may not implement a new or modified program without approval from the State Board of Education.

This form must be submitted to the SCDE, Office of Educator Services, a minimum of 60 days before the full program proposal will be submitted. Detailed information on the submission process can be found at the following [link](#).

**I. Provider and Program Details**

Name of Provider: \_\_\_\_\_

Name of Primary Contact: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Proposed Program: \_\_\_\_\_

Submission Type:  
☐ New Program  
☐ Modified Program

Intended Degree:  
☐ Bachelor's  
☐ Master's  
☐ Education Specialist  
☐ Doctorate  
☐ Post-baccalaureate/Certification Track only

Date of Proposal Submission to CHE (if CHE approval is required): \_\_\_\_\_

Intended Submission Date to the SCDE: \_\_\_\_\_

Anticipated Program Start Date: \_\_\_\_\_

Certification Field(s) to be Recommended Upon Candidate Program Completion:

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## **II. Intent**

As part of this Statement of Intent, provide a brief program summary and description of the target audience (250 word maximum).

## **III. Program Approval Information**

- The provider cannot offer any educator preparation program leading to a South Carolina credential until approval is granted by the institution (college or university), the Commission on Higher Education (CHE) if required, and the SCDE.
- The educator preparation provider must not represent to students, candidates, prospective candidates, members of the public or others that any coursework or programs currently offered leads to a South Carolina teaching credential, certificate, or authorization until approval has been granted by the institution, the CHE (if a public provider), and the SCDE.
- The SCDE is not authorized to issue an educator certificate to program completers until the program has been approved by the SBE.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_