# NEW CAREER AND TECHNICAL EDUCATION

# INNOVATIVE COURSE APPLICATION

School districts/Multi-district career centers are allowed to develop and offer innovative Career and Technical Education (CTE) courses. Innovative CTE courses should be unique courses representing emerging areas of study that fall outside of the Office of Career and Technical Education's course offerings. The Strengthening Career and Technical Education for the 21st Century Act supports the use of career and technical educational programs aligned with state, regional and local high-skill, high wage, or in-demand industry sectors or occupations. The guidelines listed below must be followed if a local educational agency (LEA) plans to offer a new innovative CTE course funded with federal (Perkins) and/or state Education Improvement Act (EIA) funds.

**Guidelines for offering a new CTE innovative course that can become a part of an existing program or a component of a proposed new CTE innovative program.**

1. The new innovative course application should be completed for **new innovative courses only**.
2. The new innovative course application is a form fill-in document. **Handwritten applications will not be accepted**.
3. The new innovative course application must be completed and submitted to the Office of Career and Technical Education for approval. The deadline for submitting a new innovative course application is **January 31**, prior to the beginning of the school year in which the **new** innovative course will be taught. For example, the new innovative course application must be submitted no later than **Friday,** **January 31, 2025,** if the course is going to be taught during the **2025-2026** school year.
4. Documentation of the completed needs assessment, employer surveys, and student surveys must be provided. Students’ career assessment information may also be used.

* The course must lead to positive postsecondary outcomes.
* The course must be needed by area employers.
* The course must be one that will be selected by students.

1. Minimum Course Requirements:

* The LEA must demonstrate how the proposed new innovative course can generate interest or be included as a component of an existing CTE program or a newly created program:
* The name of the CTE program (existing or newly created) must be provided in the application;
* The courses offered in the CTE program (existing or newly created) and the units of credit for each course must also be listed in the application;
* The number of required units must be a minimum of one unit of credit aligned with course content curriculum requirements.
* The first two courses in the CTE program (newly created) will be identified as the concentrator courses; and
* The new innovative course must be standards based.
* The new innovative course may lead to national or industry certification.
* The LEA must provide adequate resources and instructional materials.

1. The local career and technical education advisory committee and local board of trustees must approve the proposed course.
2. A course syllabus must be submitted along with the innovative course application. The course syllabus must include (but is not limited to) the following:

a.) Course Name

b.) Unit(s) of Credit

c.) Prerequisite(s)

d.) Narrative Description of the Course

e.) Course Standards

f.) Course Outline (Scope and Sequence)

g.) Instructional Materials and Other Resources

h.) Methods of Student Evaluation

1. The application for the **new** Innovative CTE coursemust be approved **prior** to submitting the LEA’s Local Application if Perkins (federal) or EIA (state) funds will be budgeted for the innovative course.
2. The application must contain the signatures of the teacher of the new innovative course, the principal/director of the school/center where the course will be offered, and the district superintendent or designee. If a multi-district career center is submitting an application, signatures must be obtained from the superintendents of **all** districts sending students to the center.
3. The person identified as preparing and submitting the new innovative course application will be notified in writing as to whether the new innovative course application has been approved.
4. The completed signed application including supporting documentation should be e-mailed by **Friday**, **January 31, 2025** to: [mingram@ed.sc.gov](mailto:mingram@ed.sc.gov)
5. If unable to send all supporting document(s) electronically, mail to:

Murline S. Ingram

SCDE – Office of Career and Technical Education

428 Wholesale Lane

West Columbia, SC 29172-3171

Questions related to course content may be directed to the following individuals:

| **Career Clusters** | **Contact Person** |
| --- | --- |
| * Arts, A/V Technology & Communications * Education & Training * Hospitality & Tourism * Human Services/Family & Consumer Sciences * Science, Technology, Engineering & Mathematics | Dr. Eleanor Glover Gladney  803-734-3826  [eglover@ed.sc.gov](mailto:eglover@ed.sc.gov) |
| * Health Science | Angel Clark  803-734-0372  aclark@ed.sc.gov |
| * Information Technology | Andrew Cook  803-734-7168  [acook@ed.sc.gov](mailto:acook@ed.sc.gov) |
| * Business Management & Administration * Finance * Marketing | Dana Depew  803-734-2828  [ddepew@ed.sc.gov](mailto:ddepew@ed.sc.gov) |
| * Agriculture, Food & Natural Resources | Troy Helms  803-320-1064  [rthelms@clemson.edu](mailto:rthelms@clemson.edu) |
| * Arts, A/V Technology & Communications * Science, Technology, Engineering & Mathematics * Transportation, Distribution & Logistics | B. T. Martin  803-734-3398  [btmartin@ed.sc.gov](mailto:btmartin@ed.sc.gov) |
| * Architecture & Construction * Government & Public Administration * Law, Public Safety, Corrections & Security * Manufacturing | Steven Watterson  803-734-8267  [swatterson@ed.sc.gov](mailto:swatterson@ed.sc.gov) |

**NEW CAREER AND TECHNICAL EDUCATION INNOVATIVE COURSE APPLICATION**

**Application must be keyed. Handwritten applications will not be accepted.**

1. School District/Multi-District Career Center Name
2. School Name Where the Innovative Course Will Be Offered

If the course will be offered at a career and technology center, please provide the name of each high school that may send students to the center to participate in the innovative course.

1. Date Innovative Course Application Submitted
2. Name of Innovative Course
3. Application Prepared by
4. Position/Title
5. Mailing Address
6. Email Address
7. Telephone Number
8. Principal/Director of School Where the Innovative Course Will Be Offered
9. Course Beginning Date (Month/Year)
10. Course Ending Date (Month/Year)
11. Length of Course  Semester  Year
12. Grade Level(s)
13. Projected Enrollment: Males       Females
14. Unit(s) of Credit to Be Granted:

      1 unit (120 hours of instructional time)

      2 units (240 hours of instructional time)

1. Check the applicable Career Cluster:

1) Agriculture, Food & Natural Resources

2) Architecture & Construction

3) Arts, A/V Technology & Communications

4) Business Management & Administration

5) Education & Training

6) Finance

7) Government & Public Administration

8) Health Science

9) Hospitality & Tourism

10) Human Services/Family and Consumer Sciences

11) Information Technology

12) Law, Public Safety, Corrections & Security

13) Manufacturing

14) Marketing

15) Science, Technology, Engineering & Mathematics

16) Transportation, Distribution & Logistics

1. Teacher Name
2. South Carolina Teaching Credential Number
3. List all area(s) of certification/endorsement that appear on the SC Teaching Credential.
4. List all industry certification(s), license(s), and/or registration(s) which this teacher possesses.
5. List any specific experience(s) or training the teacher may have in this area of study.
6. How does this course differ from current state approved CTE courses?
7. What warrants offering this course as an innovative course?
8. List the criteria used for selecting students for the course.
9. Identify how the innovative course will be offered as:

**a)** a part of an existing state approved CTE program or

**b)** offered as a component of a proposed new CTE program.

**Check “a” or “b”** below and provide the requested information for the item checked.

a. The innovative course will be added to an existing state recognized CTE program.

The **6-digit CIP code:**

The name of the program is:

The CTE courses currently offered in the state recognized CTE program:

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**b.** The innovative course will be offered as a **component of a proposed new CTE program** comprised of a sequence of innovative courses for the LEA.

The name of the proposed program is:

Note: The **first two courses** in the sequence of courses will be identified as the **concentrator courses**.

List the sequence of courses that will be offered in the proposed new program:

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| --- | --- | --- |
| Course Title | Grade Level | Units |
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1. Identify the industry-recognized certification(s) aligned with the innovative course.
2. If applicable, list the dual enrollment opportunity below:

Postsecondary Institution Name

Postsecondary Course Name

1. Submit documentation of the results from the employers’ survey.

How many area employers were surveyed?

How many employer responses were received?

Summarize the employers’ responses to the need for the innovative course.

1. Submit documentation of the results from the students’ surveys.

How many students were surveyed?

How many student responses were received?

Summarize the students’ responses to the need for the innovative courses.

1. Explain how the needs assessment conducted at the local level substantiates the need for the innovative course.
2. Has the innovative course been approved by the local career and technical advisory committee?

Yes  No

1. Does this course have the approval of the local board of trustees?

Yes  No

Teacher of the Innovative Course

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Principal/Director of School where Innovative Course will be offered

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District CTE Coordinator

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CTE Advisory Council Chair

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_

Superintendent or Designee

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(Applicable ONLY for a multi-district career center serving more than one district)

Superintendent or Designee

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(Applicable ONLY for a multi-district career center serving more than one district)

Superintendent or Designee

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(Applicable ONLY for a multi-district career center serving more than one district)

**NEW CAREER AND TECHNICAL EDUCATION INNOVATIVE COURSE CHECKLIST**

(For use by SCDE reviewer; applicant may wish to use as checklist)

1. The completed innovative course application was submitted by **Wednesday**, **January 31**, **2024**.

2. A needs assessment has been completed by the LEA, and documentation is provided to substantiate submitting an innovative course application

3. Area employers and student surveys have been conducted, and documentation is provided to substantiate submitting and innovative course application.

4. The district demonstrated that the innovative course is:

a.) a component of an existing CIP-coded program or

b.) a course leading to a newly developed CTE program.

5. A course syllabus has been submitted and contains the following mandatory inclusions.

a.) Course Name

b.) Units of Credit

c.) Prerequisite(s)

d.) Narrative Description of the Course

e.) Course Standards

f.) Course Outline (Scope and Sequence)

g.) Instructional Materials and Other Resources Used

h.) Methods of Student Evaluation

6. The innovative course is standards based.

7. The innovative course will lead to an industry-recognized certification.

8. If applicable, the innovative course may be aligned with a postsecondary course.

9. The local Career and Technical Education advisory committee has approved the innovative course.

10. The local board of trustees has approved the innovative course.

11. The teacher of the innovative course is properly certified, and the signature has been obtained.

12. The required signatures where the innovative course will be offered have been obtained:

Principal or Director

District CTE Coordinator

CTE Advisory Council Chair

District Superintendent or Designee

**For SCDE use only**

**Approved  Disapproved**

**Signature of CTE Education Associate(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Date \_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_**

**Signature of CTE Director \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_**

**Signature of CTE Data Collection Staff \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****\_ Date** **\_\_\_\_\_\_\_\_\_\_\_**

**CTE Course Code(s) Assigned** **\_\_\_*\_\_\_\_\_\_\_\_\_\_\_\_\_* \_\_\_*\_\_\_\_\_\_\_\_\_\_\_\_\_* \_\_\_*\_\_\_\_\_\_\_\_\_\_\_\_\_* \_\_\_*\_\_\_\_\_\_\_\_\_\_\_\_\_***

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