



## Pre-Approval of CITS Instructor Educational Plan

This form is for instructors granted the option of developing an educational plan to obtain appropriate teaching credentials for the CITS program.

### Part A: Please Print

Instructor Name \_\_\_\_\_ Date of Request \_\_\_\_\_  
High School \_\_\_\_\_ CITS Course(s) Taught \_\_\_\_\_  
Highest Degree Attained \_\_\_\_\_ Credential Field Pursued \_\_\_\_\_  
No. of Additional Credits Required \_\_\_\_\_ Anticipated Completion Date \_\_\_\_\_  
Signature \_\_\_\_\_ Contact Number \_\_\_\_\_

### Part B: Educational Plan

**Step One:** Attach program outline with course descriptions for each course listed.

**Step Two:** Complete the coursework plan below.

Course Dept & #	Course Title	# of Credits	Anticipated Date	Institution

Comments: \_\_\_\_\_

\_\_\_\_\_

### Part C: For Office Use Only

\_\_\_\_\_ Approve \_\_\_\_\_ Request More Information \_\_\_\_\_ Deny

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Academic Dean

\_\_\_\_\_  
Date

\_\_\_\_\_  
Vice President of Academic and Student Affairs

\_\_\_\_\_  
Date