

Teacher Verification Form

To be completed every academic year by high school instructors teaching CTE eligible courses

Teacher Name

High School

District

High School Address

Email

Phone Number

List high school classes below:

| College Course Name and Course Number | HS Class Name | Course Length |
|---------------------------------------|---------------|---|
| | | <input type="checkbox"/> Sem 1 <input type="checkbox"/> Sem 2 <input type="checkbox"/> Yearlong |
| | | <input type="checkbox"/> Sem 1 <input type="checkbox"/> Sem 2 <input type="checkbox"/> Yearlong |
| | | <input type="checkbox"/> Sem 1 <input type="checkbox"/> Sem 2 <input type="checkbox"/> Yearlong |
| | | <input type="checkbox"/> Sem 1 <input type="checkbox"/> Sem 2 <input type="checkbox"/> Yearlong |
| | | <input type="checkbox"/> Sem 1 <input type="checkbox"/> Sem 2 <input type="checkbox"/> Yearlong |
| | | <input type="checkbox"/> Sem 1 <input type="checkbox"/> Sem 2 <input type="checkbox"/> Yearlong |

Understanding and Responsibilities

By signing, the CTE Instructor understands that they are responsible for the following:

- Ensure all students receive a copy of the course syllabus outlining information about CTE, the college course competencies, and the process required to earn college credit.
- Schedule a day for students to complete Wenatchee Valley College's CTE Student Registration Form.
- Submit final grades for all students registered to earn CTE college credit by Wenatchee Valley College's CTE deadline.



By signing, the CTE Director is verifying that the teacher listed above is CTE certified with the proper V codes to teach in that particular discipline.

High School Director Signature _____ Date _____

High School Instructor Signature _____ Date _____