|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| CEPD: |  |  | School District: |  |
| Region: |  |  | School Year: |  |
| Program Name: |  |  |  |  |
| CIP Number: |  |  |  |  |
| Program PSN: |  |  |  |  |

NOTE: Address, City, State, Zip Code, and Phone Number are optional items.

|  |
| --- |
| **Advisory Committee Chairperson:**Required: Chairperson must be from business/industry. |
| Name: |  |
| Position/Title: |  |
| Company: |  |
| Address: |  |
| City: |  |
| Zip Code: |  |
| Phone Number: |  |
| E-mail Address: |  |

|  |
| --- |
| **Program Instructor(s):** |
| Name: |  |  | Name: |  |
| Position/Title: |  |  | Position/Title: |  |
| Company: |  |  | Company: |  |
| Address: |  |  | Address: |  |
| City: |  |  | City: |  |
| Zip Code: |  |  | Zip Code: |  |
| Phone Number: |  |  | Phone Number: |  |
| E-mail Address: |  |  | E-mail Address: |  |
|  |  |  |  |  |
| Name: |  |  | Name: |  |
| Position/Title: |  |  | Position/Title: |  |
| Company: |  |  | Company: |  |
| Address: |  |  | Address: |  |
| City: |  |  | City: |  |
| Zip Code: |  |  | Zip Code: |  |
| Phone Number: |  |  | Phone Number: |  |
| E-mail Address: |  |  | E-mail Address: |  |

|  |
| --- |
| **Local School District Personnel:**Recommended: 1 CTE Director/Administrator, 1 Guidance Counselor |
| Name: |  |  | Name: |  |
| Position/Title: |  |  | Position/Title: |  |
| Company: |  |  | Company: |  |
| Address: |  |  | Address: |  |
| City: |  |  | City: |  |
| Zip Code: |  |  | Zip Code: |  |
| Phone Number: |  |  | Phone Number: |  |
| E-mail Address: |  |  | E-mail Address: |  |
|  |  |  |  |  |
| Name: |  |  | Name: |  |
| Position/Title: |  |  | Position/Title: |  |
| Company: |  |  | Company: |  |
| Address: |  |  | Address: |  |
| City: |  |  | City: |  |
| Zip Code: |  |  | Zip Code: |  |
| Phone Number: |  |  | Phone Number: |  |
| E-mail Address: |  |  | E-mail Address: |  |

|  |
| --- |
| **Parent Advisory Member(s):**Required: 1 Parent |
| Parent Name: |  |  | Parent Name: |  |
| Address: |  |  | Address: |  |
| City: |  |  | City: |  |
| Zip Code: |  |  | Zip Code: |  |
| Phone Number: |  |  | Phone Number: |  |
| E-mail Address: |  |  | E-mail Address: |  |

|  |
| --- |
| **Student Advisory Member(s):**Recommended: 1 Student |
| Student Name: |  |  | Student Name: |  |
| Address: |  |  | Address: |  |
| City: |  |  | City: |  |
| Zip Code: |  |  | Zip Code: |  |
| Phone Number: |  |  | Phone Number: |  |
| E-mail Address: |  |  | E-mail Address: |  |

|  |
| --- |
| **Post-Secondary Advisory Member(s):**Required: 1 post-secondary representative |
| Name: |  |  | Name: |  |
| Position/Title: |  |  | Position/Title: |  |
| Company: |  |  | Company: |  |
| Address: |  |  | Address: |  |
| City: |  |  | City: |  |
| Zip Code: |  |  | Zip Code: |  |
| Phone Number: |  |  | Phone Number: |  |
| E-mail Address: |  |  | E-mail Address: |  |

|  |
| --- |
| **Industry Advisory Committee Members:**Required: Majority must be representatives of business/industry specific to CTE program. |
| Name: |  |  | Name: |  |
| Position/Title: |  |  | Position/Title: |  |
| Company: |  |  | Company; |  |
| Address: |  |  | Address: |  |
| City: |  |  | City: |  |
| Zip Code: |  |  | Zip Code: |  |
| Phone Number: |  |  | Phone Number: |  |
| E-mail Address: |  |  | E-mail Address: |  |
|  |  |  |  |  |
| Name: |  |  | Name: |  |
| Position/Title: |  |  | Position/Title: |  |
| Company: |  |  | Company; |  |
| Address: |  |  | Address: |  |
| City: |  |  | City: |  |
| Zip Code: |  |  | Zip Code: |  |
| Phone Number: |  |  | Phone Number: |  |
| E-mail Address: |  |  | E-mail Address: |  |
|  |  |  |  |  |
| Name: |  |  | Name: |  |
| Position/Title: |  |  | Position/Title: |  |
| Company: |  |  | Company; |  |
| Address: |  |  | Address: |  |
| City: |  |  | City: |  |
| Zip Code: |  |  | Zip Code: |  |
| Phone Number: |  |  | Phone Number: |  |
| E-mail Address: |  |  | E-mail Address: |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name: |  |  | Name: |  |
| Position/Title: |  |  | Position/Title: |  |
| Company: |  |  | Company; |  |
| Address: |  |  | Address: |  |
| City: |  |  | City: |  |
| Zip Code: |  |  | Zip Code: |  |
| Phone Number: |  |  | Phone Number: |  |
| E-mail Address: |  |  | E-mail Address: |  |
|  |  |  |  |  |
| Name: |  |  | Name: |  |
| Position/Title: |  |  | Position/Title: |  |
| Company: |  |  | Company; |  |
| Address: |  |  | Address: |  |
| City: |  |  | City: |  |
| Zip Code: |  |  | Zip Code: |  |
| Phone Number: |  |  | Phone Number: |  |
| E-mail Address: |  |  | E-mail Address: |  |
|  |  |  |  |  |
| Name: |  |  | Name: |  |
| Position/Title: |  |  | Position/Title: |  |
| Company: |  |  | Company; |  |
| Address: |  |  | Address: |  |
| City: |  |  | City: |  |
| Zip Code: |  |  | Zip Code: |  |
| Phone Number: |  |  | Phone Number: |  |
| E-mail Address: |  |  | E-mail Address: |  |
|  |  |  |  |  |
| Name: |  |  | Name: |  |
| Position/Title: |  |  | Position/Title: |  |
| Company: |  |  | Company; |  |
| Address: |  |  | Address: |  |
| City: |  |  | City: |  |
| Zip Code: |  |  | Zip Code: |  |
| Phone Number: |  |  | Phone Number: |  |
| E-mail Address: |  |  | E-mail Address: |  |
|  |  |  |  |  |
| Name: |  |  | Name: |  |
| Position/Title: |  |  | Position/Title: |  |
| Company: |  |  | Company; |  |
| Address: |  |  | Address: |  |
| City: |  |  | City: |  |
| Zip Code: |  |  | Zip Code: |  |
| Phone Number: |  |  | Phone Number: |  |
| E-mail Address: |  |  | E-mail Address: |  |