



# PRELIMINARY ADMINISTRATIVE SERVICES CREDENTIAL PROGRAM



## DISTRICT ADVISORY AGREEMENT

2019-20

Candidate's Name: \_\_\_\_\_ District: \_\_\_\_\_

District Advisors are selected by each candidate for their expertise and ability to provide access to leadership opportunities at the school or district. The District Advisor supports two key aspects of the Preliminary Administrative Services Credential Program (PASC); fieldwork and a Leadership Project.

**Course Specific Fieldwork:** Each course is designed with accompanying fieldwork assignments that help candidates extend and apply their learning to the real world of school administration and prepare them for taking the CalAPA. Fieldwork assignments include shadowing and interviewing active administrators, facilitating communities of practice, examining school/district specific data and documents, and observing and critiquing instruction.

**CalAPA Assessment Requirement:** *To qualify for a Preliminary Administrative Service Credential, candidates will need to receive a passing score on the California Administrator Performance Assessment. During the year, they will need support in getting access to data, clinical experience in leading a PLC or a community of practice, and coaching a volunteer teacher in the area of direct instruction. Their success will be contingent upon the support they receive from the site.*

*The CalAPA consists of three cycles:*

- Leadership Cycle 1: *Analyzing Data to Inform School Improvement and Promote Equity*
- Leadership Cycle 2: *Facilitating Communities of Practice*
- Leadership Cycle 3: *Supporting Teacher Growth*

**Key roles of the District Advisor:**

- Assist the candidate by providing access to district personnel, documents and resources needed for fieldwork (administrators, budget, LCAP, safety plan, etc.).
- Advise the candidate in the development and implementation of a Leadership Project.
- Provide knowledge and assistance as it relates to the candidate's growth and development toward successful completion of the program.

District Advisor Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: (    ) \_\_\_\_\_

I accept the role of District Advisor for the 2019-2020 year.

District Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_