



Santa Ana Unified School District

TIPS | Teacher Induction and Professional Support



Request for Special Assistance

Name of Participating Teacher: _____ Date: _____

School: _____ District: SAUSD Grade/Subject: _____

Request for special assistance is being made by:

Name: _____ Phone #: _____

- Participating Teacher
- Support Provider
- Administrator

Type of Special Assistance Requested:

Modification of Program Completion-Support Needed

Reason: Day-to-Day Substitute requesting permission to clear credential through SAUSD Teacher Induction. To accomplish this, an agreement must be formalized wherein the participant adopts a classroom that will enable program completion.

Special Assistance Action Plan

Participating Teacher will be able to complete Teacher Induction with the assistance of a host school and classroom. The participating teacher will:

- establish a relationship with the students, as well as create an effective environment for learning;
- access and analyze student data- this necessitates access to Illuminate, the data reporting system;
- teach one lesson that is observed by the mentor (Mod. B); and
- teach a 3-5 lesson unit with one lesson observed by the mentor (Mod. C).

Other: This form acknowledges that the full-time teacher and site administrator are aware of this circumstance and agree to allow the participating teacher to complete the Clear Credential requirements in a specified classroom. To ensure student learning is not disrupted, the Participating Teacher agrees to align instructional lessons to the curricular goals and pacing of the host teacher.

Host Site Administrator Signature	Date	Host Classroom Teacher Signature	Date
Participating Teacher Signature	Date	Support Provider Signature	Date
District Induction Program Approval	Date		