

**NEW PROGRAM REQUEST FORM: PSAV CLOCK HOUR**  
**FLORIDA DEPARTMENT OF EDUCATION**  
**Division of Career and Adult Education**  
**Career and Technical Education Programs**

**DIRECTIONS**

Complete this form and provide all required information including a draft curriculum framework and justification statement. Submit package to Eric Owens **no later than October 30<sup>th</sup>** to be considered for approval for the following school year beginning July 1<sup>st</sup> and ending June 30<sup>th</sup>. Send a hard copy and an electronic file to the contact below.

Eric Owens, Senior Educational Program Director  
 Career and Technical Education Programs, Division of Career and Adult Education  
 325 West Gaines Street, Suite 701, Tallahassee, Florida 32399-0400  
 850-245-9020 [Eric.Owens@fldoe.org](mailto:Eric.Owens@fldoe.org)

**PROGRAM INFORMATION**

**Proposed Program Title:** \_\_\_\_\_

| <u>Proposed Course Titles</u>       | <u>Length</u> |
|-------------------------------------|---------------|
| _____                               | _____         |
| _____                               | _____         |
| _____                               | _____         |
| Total Program Length (Clock Hours): | _____         |

**SUBMITTED BY**

|                         |                |
|-------------------------|----------------|
| Institution Name: _____ | Date: _____    |
| Contact Person: _____   | Address: _____ |
| Contact Title: _____    | _____          |
| Phone/Ext: _____        | Email: _____   |

**LOCAL APPROVAL (Both must sign.)**

|                                                                                                                   |                                     |
|-------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| District CTE Director / Tech Center or College Director /<br>College Occupational Dean / Academic Vice President: | Superintendent / College President: |
|-------------------------------------------------------------------------------------------------------------------|-------------------------------------|

**JUSTIFICATION**

Please describe the compelling need for the new program, including why an existing program will not serve the need. Justification should include workforce demand projections and letter(s) from business/industry stating the need for the proposed program. Additional justification may include a letter from the local workforce board.

**CURRICULUM FRAMEWORK**

The curriculum framework (in MS Word) for the proposed program includes the following:

- a. Standards and benchmarks.
- b. Identified Occupational Completion Points (OCPs) with suggested lengths.
- c. Proposed Standard Occupational Classification (SOC) titles and codes from O\*NET (<http://online.onetcenter.org/>).
- d. Proposed Basic Skill Level if proposed program is over 450 hours and if Basic Skills are applicable.
- e. Proposed Career Cluster and Career Pathway.
- f. Proposed teacher/ instructor certifications.
- g. Proposed Career and Technical Student Organization (CTSO), as applicable.