



# Qualification Cover Sheet Employee Information

Department of Education Office of Talent Management EQ Section  
P.O. Box 2360 Honolulu, HI 96804

## Attachment C: Sheltered Instruction

Name: \_\_\_\_\_ Emp ID: \_\_\_\_\_

School/Office: \_\_\_\_\_

I am seeking the Sheltered Instruction Qualification through the following Option. *Select Only One (1):*

**Option 1:** Completion of Six (6) college credits in TESOL-related foundational EL knowledge from an accredited college or university or program. *Attach official transcript.*

**Option 2:** Completion of two (2) three (3) credit HIDOE-sponsored ESL or TESOL PDE3 courses. PDE3 Course Name: \_\_\_\_\_ Section # & date completed: \_\_\_\_\_

PDE3 Course Name: \_\_\_\_\_ Section # & date completed: \_\_\_\_\_

**Option 3:** Completion of seventy-two (72) seat hours of TESOL-related HIDOE non-credit PD workshops or courses.

Course or Conference	Course number & Section	Date of Completion	# of Seat Hours

*If additional space is required, please attach a separate sheet*

**Option 4:** Out-of-state TESOL endorsement earned from another state. *Attach Endorsement.*

**Option 5:** TESOL HQ or TESOL licensure status in lieu of 6 credits. *You do not need to submit additional information if you have a TESOL HQ or License. If you need to submit documentation to meet this requirement, please refer to the HQ Documentation Coversheet, document 2a in the ESSA Hawaii Qualified Teacher Handbook.*

**Option 6:** Microcredentials in TESOL. *Attach your eight (8) stacks of the National Education Association ELL Micro credential.*

**Option 7: Combination of Options 1 and 2 above:** Completion of Three (3) college credits in TESOL-related foundational EL knowledge from an accredited college or university or program, *attach official transcript* and Completion of One (1) three (3) credit HIDOE-sponsored ESL or TESOL PDE3 courses, provide course information:

PDE3 Course Name: \_\_\_\_\_ Section # & date completed: \_\_\_\_\_

I certify that the above information is accurately reported to the best of my knowledge. Any misrepresentation or falsification of information on this form may result in sanctions including termination from employment or disciplinary action.

**Teacher Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Submission Instructions:** Please submit this cover sheet along with supporting documentation to the Educator Quality Section:  
**Mail:** P.O. Box 2360, Honolulu, HI 96804 *or* via **HIDOE Courier:** OTM, Educator Quality Section *or* **email:** hqt@k12.hi.us

Attachment C, Revised: 04/24/2020