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| **2022 Temporary COVID-19 Programme Changes Application**  **Please complete one form per programme.**  *Please complete and return to* [*ITEadmin@teachingcouncil.nz*](mailto:ITEadmin@teachingcouncil.nz) *and cc your Lead Advisor.* | | | | | |
| Provider |  | | **Date** | | |
| Provider Contact |  | | | | |
| Programme |  | | | | |
| Cohorts and  number of students impacted by change | 2022 Graduates | *Mid Year* | | *End of Year* | |
| 2023 Graduates *(as applicable)* | *Mid Year* | | *End of Year* | |
| 2024 Graduates *(as applicable)* | *Mid Year* | | *End of Year* | |
| Alternative/part time students |  | | | |
| Location of students impacted | |  | | | |
| Has this cohort been impacted previously by programme changes due to COVID-19? If yes, describe what this impact was. | |  | | | |
| **Notification of plan in case of mandatory COVID19 isolation** | | | | | |
| Have you got a COVID-19 plan in place if students are required to isolate during campus or PEP (Professional Experience Placement) obligations? | | Yes No | | | |
| **APPLICATION FOR APPROVAL OF CHANGES FOR 2022**  Please note the below changes are not automatically approved for implementation. Applications to use these changes are individually triaged and may be referred to the Emergency Response Panel for consideration. | | **Information regarding proposed change, including when it would come into effect and anticipated duration, and approx. number of students impacted by the change** | | | |
| Proposed alternative Professional Experience Placement (PEP) () or assessments, e.g., micro teaching, simulated teaching, small group teaching, hybrid teaching, online teaching. | |  | | | |
| Proposed change to teaching online for campus-based programmes who do not have a blended/online option. | |  | | | |
| **NOTIFICATION OF CHANGES FOR 2022**  Please note the below changes are automatically approved for implementation. Notification of your intent to use these changes is for Teaching Council administrative purposes. | | | | | |
| **Professional Experience Placements (PEP) changes**  Note: Total PEP requirements still apply at this time. The Council | Matatū considers a student teacher’s ability to interact with ākonga in face-to-face settings is a fundamental teaching skill which must be practised, observed and assessed in an Aotearoa | New Zealand setting. There continues to be an expectation that placements wherever possible, will involve face-to-face interactions and cover a range of socioeconomic, cultural, and learner age group settings. | | | | | |
| **Type of PEP change** | | **Information regarding proposed change, including when it would come into effect and anticipated duration, and approx. number of students impacted by the change** | | | |
| Notification for use of the documented minimum approved PEP periods.  *This is only for* *programmes which as approved currently****deliver more than****the minimum PEP time as set out in the relevant ITE Requirements (2010 or 2019).* | |  | | | |
| Notification to move PEP to an alternative date. | |  | | | |
| Notification of removal of requirement for consecutive block of teaching practice. | |  | | | |
| Notification of removal of requirement of away teaching block.  *Please provide additional information regarding how the variety and diversity of PEP over the course of the programme will be managed.* | |  | | | |
| Notification of proposed use of assessed field/school-based experience as PEP hours.  *Please provide additional information regarding how the variety and diversity of PEP will be managed.* | |  | | | |
| Notification of removal of mandatory hours for employment- and field-based practice. | |  | | | |
| Proposed temporary change to visiting protocols for PEP. | |  | | | |
| **Other notification changes** | | **Information regarding proposed change, including when it would come into effect and anticipated duration, and approx. number of students impacted by the change** | | | |
| Notification of temporary change to entry, literacy and numeracy assessments from face-to-face and under supervision as approved, to online assessment.  *Please comment on the identity verification processes that will be applied.* | |  | | | |
| Panel Required | Yes No | Panel Recommendation | | |  |
| Letter/ Memo |  | Provider/NZQA/CUAP notified | | |  |