PATRICIA HAMAMOTO SUPERINTENDENT





STATE OF HAWAI'I

DEPARTMENT OF EDUCATION P.O. BOX 2360

HONOLULU, HAWAPI 96804

OFFICE OF THE SUPERINTENDENT

Date:

July 23, 2007

Memo To:

Charter School Directors/Administrators

From:

Patricia Hamamoto

Superintendent

Subject:

Procedural Guidelines for the Reclassification of Public Charter School (PCS)

Teachers

The Department of Education (DOE), in acknowledging the authority of public charter schools (PCS), has established procedural guidelines in processing reclassification requests for public charter school teachers. The following outlines the options available to public charter schools who have purchased services from the DOE.

Option #1: Public Charter School Authorizes Reclassification

The PCS authorizes the reclassification request made by their teachers. To exercise this option, Form 201CS must be completed and submitted to the Office of Human Resources (OHR). The teacher completes #1 through #4. The PCS Director/Administrator completes #5 indicating the change in the teacher's class and the effective date of that change. Official university transcripts and/or professional development credits are not required.

Option #2: DOE Conducts Review of Credits; PCS Authorizes Reclassification At the request of PCS, courses submitted for reclassification are reviewed utilizing the Department's current reclassification guidelines. The result of the review is for record only, as PCS will still authorize the reclassification request made by their teachers. To exercise this option, the teacher completes #1 - #4, #6, and #7 on Form 201CS. The PCS Director/Administrator completes #5 indicating the change in the teacher's class and the effective date of that change. Official university transcripts, professional development credits. and other relevant documents must be submitted with the Form 201CS.

Option #3: PCS Authorizes Reclassification in Accordance With DOE Guidelines The PCS requests that the reclassification of their teachers be in accordance to the DOE's current reclassification guidelines. To exercise this option, the teacher completes the entire Form 201CS, except #5, submitting official university transcripts, professional development credits, and other relevant documents. The PCS Director/Administrator determines if the courses submitted are aligned to their school's strategic plan (see #7f). Signatures of teacher and PCS Director/Administrator are required (see #8a and #8b).

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Please note that a favorable review does not guarantee that these credits will be accepted in the future, should a public charter school teacher decide to apply or transfer back to the DOE. The OHR shall conduct a reassessment of all approved academic and professional development credits carned, while at the public charter school, to determine if they meet Department's current guidelines for initial classification and/or reclassification.

Enclosed is Form 201CS to be submitted with all reclassification requests. Please duplicate this form as needed.

Should you have any further questions or concerns regarding this matter, please contact the Teacher Reclassification Unit at 586-3649.

PH:WK:kyc

Enclosures

c: Fay Ikei, Acting Assistant Superintendent, OHR
Bruce Shimomoto, Director, OHR
Judy Toguchi, Personnel Administrator, OHR
Maunalei Love, Interim Executive Director, Charter School Administrative Office Sean Murakami, Acting PCS Program Specialist
Joan Husted, Executive Director, HSTA



STATE OF HAWAII DEPARTMENT OF EDUCATION Office of Human Resources Teacher Reclassification Unit/ Teacher Recruitment Unit 680 Iwilei Road, Suite 490

CHARTER SCHOOL TEACHER REQUEST FORM (FORM 201CS, 6/07)

RECLASSIFICATION

	Honoi	ահա, MX 96817	. 1					
1. NAME (Lent, First, MT):			2. SOCIAL SECURITY NO.:	ITY NO.: 3. SCHOOL:		4. DISTRICT:		
5. REQUEST FOR R	RECLASSIFICATION: this Charter School Teach	ther from Class	To Classeffective	Effective Date				•
				Effective Date				
Charter School Director/Administrator Signature			Charter School Name		Date			
[]*Ton []*Ton []Upda *SATEP - State Ap	or Intensive Review of Co acher (SATEP): From Cl acher (MO SATEP): From alle Only aproved Teacher Educati	lass To			·			·
7. ACADEMIC CRI	EDITS: (University cred	its that are part of c	ourse work requirements for a progr	am of study leading to a deg	rec at an accredited uni	versity/colleg	c.)	
7A. SESSION/ SEMESTER/ YEAR	74, COURSE 74, COLLEGE/ AUMHA & NO. UNIVERSIT		NAME 7d, TITLE OF COURSE			SEMESTER CREDIT	7f. CHECK IF SPA	PRINCIPAL TO INITIAL IP SPA
		_						
	<u> </u>							
8ª **TEACHER'S	SIGNATURE:			8b. **PCS DIRECTOR/A	DMINISTRATOR'S S	IGNATURE:		
DATE:				DATE:				

instructions are on the reverse side of this form. If more space is needed, submit an additional Form 201CS.

** Form 201 without teacher's and principal's signature will be returned with no action taken.