SCHOOL ADMINISTRATOR RESIDENCY PROGRAM

RECOMMENDATION FOR THE STANDARD ADMINISTRATOR CERTIFICATE WITH THE SCHOOL ADMINISTRATOR ENDORSEMENT

(To Be Completed by the Candidate's Mentor)

Candidate: _____

School District: _____ County: _____

Mentor: _____

Administrator Residency Program: _____

Residency Fees Have Been Paid in Full: MENTOR _____ PROGRAM _____

To inform the decision for the standard certificate, please enter the information for this candidate as indicated in the tables below.

State Requirements for Standard Certification	Yes	No
The candidate has completed all the required experiences and training of the school administrator residency program, as set forth in *N.J.A.C.* 6A:9B-12.4(e).	☐	☐
The candidate has fulfilled the expectations of his/her individualized mentoring plan, as set forth in *N.J.A.C.* 6A:9B-12.4(e)2v.	☐	☐
The candidate has been formally evaluated by his/her mentor on at least three occasions for purposes of certification, as set forth in *N.J.A.C.* 6A:9B-12.4(g).	☐	☐
The candidate's progress towards standard certification has been reviewed by an advisory panel of practicing educators, as set forth in *N.J.A.C.* 6A:9B-12:4(h).	☐	☐

Residency Program Provider Requirements	Yes	No
The candidate has satisfied the administrator residency program provider's specialized requirements, including payment of fees.	☐	☐

Recommendation for Standard Administrator Certificate with the School Administrator Endorsement	Check One
APPROVED: A standard certificate should be issued to this candidate.	☐
INSUFFICIENT: A standard certificate should not be issued, but the candidate should be allowed to continue the residency or seek admission to another residency for one additional year.	☐
DISAPPROVED: A standard certificate should not be issued, and the candidate should be prevented from continuing or re-entering a residency program.	☐

Comments in support of this recommendation:

I understand that I am acting as an agent of the Board of Examiners in submitting this certification recommendation. Signed,

MENTOR: _____DATE: _____