



INTEGRATIVE PROJECT READINESS FORM FOR ADVISOR ONLY
to be completed and submitted prior to the Integrative Project phase

Educator's Name: _____ Date: _____

Certification Level: _____

1. What is this educator's sense of call? What, if any, process of discernment has the educator used in order to explore/expand this call?

2. Describe any areas of possible concern that need to be addressed with the educator prior to the Integrative Project phase.

3. Describe the process or time management strategy that will carry through the six-month project time period.

4. The educator, with approval from their Reference Group, may request translations, accommodations, or alternative means to complete the areas covered in the Integrative Project. Requests that are approved by the Reference Group shall be forwarded to the Educator Certification Committee for final approval. Is the educator planning to put in a request and has this request been approved by the Reference Group?

Approximate date that project will be requested in writing **by the Educator**:

Does the educator have a plan for completing the project and do you recommend that the educator move into the project phase?

Yes

No (comments below)

Certification Advisor Name _____

Date _____