**Transcript Review Worksheet**

**5440-31 Health Education**

The holder is authorized to teach health education in grades PK-8, 5-12, or PK-12, as specified on the endorsement.

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Educator ID#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Add Endorsement  Course Audit**

Please note that the transcript review worksheets indicate only the endorsement competencies that must be met. There may be additional jurisdictional requirements.

For a full list of requirements, please consult the [Rules Governing the Licensing of Educators](https://education.vermont.gov/documents/educator-quality-licensing-rules).

| **Content**  **Topic** | **College/**  **University** | **Course**  **Number** | **# of Credits** | **Course**  **Title** | **How did this course meet this competency?** |
| --- | --- | --- | --- | --- | --- |
| 1. The candidate shall demonstrate knowledge of Vermont statutes (Vermont Act 1, VSA 16: 131, 906, 136, and the Education Quality Standards (e.g., proficiency-based learning, personalized learning, and flexible pathways) that guide comprehensive health education in Vermont, as well as policies that relate to the school setting | | | | | |
| In order to qualify for this endorsement, the candidate shall demonstrate the following:  **2. Knowledge Standards:** | | | | | |
| 2.1. Demonstrates knowledge of health and health education concepts and skills delineated in current national professional standards, in SHAPE America – National Standards for Initial Health Education Teacher Education (2018) and in National Health Education Standards, Center of Disease Control (CDC) Health Education Curriculum Analysis Tool (HECAT) and National Sexuality Education Standards including: |  |  |  |  |  |
| 2.2. Process for implementing teaching skills-based Health Education |  |  |  |  |  |
| 2.3. Teaching Health Skills (Interpersonal communication, media literacy, advocacy, analyzing influences, decision-making, goal-setting, and accessing health information, products, and services) |  |  |  |  |  |
| 2.4. Human development, including the typical progression of early childhood through early adolescent development (for PK-8) and/or early adolescent through adult growth and development (for 5-12), and age appropriate indicators of intellectual, physical, social and emotional health for each stage of development |  |  |  |  |  |
| 2.5. Human body structure and functioning |  |  |  |  |  |
| 2.6. Personal health (mental, physical, social intellectual, and the value of annual well care visits and healthful stress maintenance skills) |  |  |  |  |  |
| 2.7. Nutrition (basic nutrition concepts, nutrient needs, dietary guidelines for Americans, and common nutritional problems of children and adults, including disordered eating) |  |  |  |  |  |
| 2.8. Physical activity (the health benefits of physical activity, research on physical activity and academic performance, factors that influence participation in physical activity, and strategies for collaborating with physical education colleagues to promote physical activity) |  |  |  |  |  |
| 2.9. Disease (etiology of diseases, including their origins, progression, diagnosis, treatment, and prevention, [e.g. immunizations] HIV/AIDS and other sexually transmitted infections) |  |  |  |  |  |
| 2.10 Intentional and unintentional injury prevention (safety issues and violence prevention, including bullying harassment, sexual abuse, and physical and mental/emotional trauma) |  |  |  |  |  |
| 2.11 Alcohol, tobacco, marijuana, and other drugs (physiological, psychological, and sociological effects of substance use and abuse on the individual, family, and society; legal issues; and curriculum and teaching strategies for effective substance abuse prevention) |  |  |  |  |  |
| 2.12 Family health and comprehensive sexuality education (issues of human growth and development, families, relationships, reproductive health, abstinence, premature sexual activity, contraception, adolescent pregnancy, childbirth, adoption, and abortion) |  |  |  |  |  |
| 2.13 Community and consumer health (media literacy, advocacy, and accessing health information, products, and services) |  |  |  |  |  |
| **3. Performance Standards** | | | | | |
| 3.1. Planning: Plan relevant and meaningful school health education instruction and programs that are sequential and aligned with national standards and leads students to health education proficiency |  |  |  |  |  |
| 3.1.1. Collect and analyze data (e.g., Youth Risk Behavior Survey, School Health Index results) to plan relevant school health instruction and programs that meet the diverse needs of all learners and the community. |  |  |  |  |  |
| 3.1.2. Design a logical scope and sequence of meaningful, comprehensive and challenging learning experience that meet the diverse needs of all learners. |  |  |  |  |  |
| 3.1.3. Construct measurable, developmentally appropriate, performance-based objectives that are aligned with the national standards. |  |  |  |  |  |
| 3.1.4. Plan instruction that facilitates skill development and application of functional health knowledge for all learners. |  |  |  |  |  |
| 3.1.5. Collaborate and design health education instruction and programs that integrate components of the Whole School, Whole Community, and Whole Child (WSCC) Model. |  |  |  |  |  |
| 3.1.6. Plan instruction that incorporates technology, media and other appropriate resources in order to enhance student’s digital literacy and to engage all learners |  |  |  |  |  |
| 3.2. Implementation: Implement a range of school health education proficiency-based learning instructional strategies, while incorporating technology, to support student learning. |  |  |  |  |  |
| 3.2.1. Use a variety of instructional strategies to facilitate students’ development of health-related skills and their application of functional health knowledge in order to meet the needs of all students. |  |  |  |  |  |
| 3.2.2. Implement instructional strategies that incorporate technology, media and other appropriate resources to enhance student learning and engage all learners. |  |  |  |  |  |
| 3.2.3. Implement instructional strategies that support all learners regardless of race, ethnic origin, gender, gender identity, gender expression, sexual orientation, religion, cognitive ability or physical ability, in order to create and sustain a productive, inclusive and supportive learning environment. |  |  |  |  |  |
| 3.2.4. Apply communications skills, feedback and classroom management strategies equitably to promote a safe, inclusive and supportive learning environment that meets the needs of all learners. |  |  |  |  |  |
| 3.2.5. Reflect on student learning outlines and instructional practices, and adjust lessons to meet the needs of all learners. |  |  |  |  |  |
| 3.3. Assessment: Use multiple methods of assessment to plan instruction, engage all learners, monitor learner progress, provide meaningful feedback, and reflect on and adjust units and lessons to enhance the acquisition of functional health knowledge and health skills proficiency for all learners. |  |  |  |  |  |
| 3.3.1. Analyze and select assessment strategies, tools, and technologies to determine their appropriateness for enhancing learning of all students. |  |  |  |  |  |
| 3.3.2. Implement a variety of formative and summative assessments, aligned with proficiency-based learning principles, that measure and monitor students’ progress, and to accommodate the needs of all students. |  |  |  |  |  |
| 3.3.3. Use assessment data to plan instruction, analyze student learning, reflect on implementation practices, provide meaningful feedback and adjust units and lessons so they meet the needs of all students. |  |  |  |  |  |
| 3.4. Advocates for health education as an essential component of the school community that supports the diverse needs of all learners and contributes to the school’s mission. |  |  |  |  |  |
| 4. Current certificates in First Aid full or compression only cardiopulmonary resuscitation (CPR) and the use of an Automated External Defibrillator (AED). | | | | | |
| 5. A minimum of a practicum, or the equivalent, in health education at the elementary (PK-8) or middle/secondary (5-12) instructional level, depending on the authorization sought. For the full PK-12 authorization, a minimum of a practicum, or the equivalent, in health education at both the PK-6 and 7-12 instructional levels is required. | | | | | |
| 6. Required Testing: Praxis II Subject Assessment: Health - Test Code 5551. | | | | | |