

**CPED New Member Application**

**Institution Information**

1. Name of institutionClick or tap here to enter text.
2. Institution type:

Public

Private

1. Name of Accreditation Agency

Southern Association of Colleges and Schools

Higher Learning Commission

Western Association of Schools and Colleges

Middle States Commission on Higher Education

New England Association of Schools and Colleges

Northwest Commission on Colleges and Universities

Ontario Universities Council on Quality Assurance

National Policy Board for Educational Administration

Teacher Education Accreditation Council

Other (please list) Click or tap here to enter text.

1. Is the institution in good standing with its accrediting body? Yes No
2. Institution’s Carnegie Classification (where applicable) Click or tap here to enter text.
3. Other Classifications

HBCU

PBI

HSI

TCU

NANTI

AANAPISI

1. Location type:

Urban

Suburban

Rural

1. Name and all contact information of school/college dean

First Name: Click or tap here to enter text. Last Name: Click or tap here to enter text.

Email: Click or tap here to enter text.

Address: Click or tap here to enter text.

1. Name and all contact information of the CPED Delegate who will serve as the CPED liaison

First Name: Click or tap here to enter text. Last Name: Click or tap here to enter text.

Email: Click or tap here to enter text.

Address: Click or tap here to enter text.

1. EdD program website Click or tap here to enter text.
2. School of Education logo (please provide a high-resolution file of your logo in .png or .jpg format)

**EdD Program Information**

1. Is your EdD program school-wide or departmental

School-wide

Departmental (Please specify name of department) Click or tap here to enter text.

1. Program focus area(s)

Click or tap here to enter text.

1. Is this an existing EdD or new EdD?

Click or tap here to enter text.

1. Name of Program(s)

Click or tap here to enter text.

1. Program website(s)

Click or tap here to enter text.

**For Existing EdD programs (if your program has not yet begun, move to next section below):**

1. When did your program(s) begin? Click or tap here to enter text.
2. When did you decide to redesign/improve the program?

Click or tap here to enter text.

1. What is/are the goals for your EdD programs(s)?

Click or tap here to enter text.

1. How do your goals relate to the [CPED Framework](https://www.cpedinitiative.org/the-framework)?

Click or tap here to enter text.

1. In what department is/are your EdD program(s) housed?

Click or tap here to enter text.

1. How many students do you enroll in the program annually? How many students graduate on time?

Click or tap here to enter text.

1. How many full-time faculty dedicated to your program redesign/improvement?

Click or tap here to enter text.

1. The percentage of faculty teaching EdD courses that are:

Click or tap here to enter text.% Tenure Track

Click or tap here to enter text.% Full-time Renewable Term Faculty (Ex. Clinical/Professors of Practice)

Click or tap here to enter text.% Part-time/Adjunct

Click or tap here to enter text.% Other (Please explain) Click or tap here to enter text.

1. Describe what your program faculty believe to be the value/purpose of the EdD?

Click or tap here to enter text.

1. Briefly describe your program including number of credits/courses, overview of course offerings, degree requirements including milestones and time to degree.

Click or tap here to enter text.

**For newly designed EdD Programs (move to next section if your program has begun and you have completed the previous section):**

1. Has the program been formally approved by your institution and state approval processes (if necessary)? When?

Click or tap here to enter text.

1. When will your program(s) begin enrolling students?

Click or tap here to enter text.

1. What will be the goals for your EdD programs(s)?

Click or tap here to enter text.

1. How do your program goals relate to the goals of CPED/CPED Framework?

Click or tap here to enter text.

1. In what department will your EdD program(s) be housed?

Click or tap here to enter text.

1. How many full-time faculty are dedicated to your program design and implementation?

Click or tap here to enter text.

1. The percentage of faculty that will teach EdD courses that are:

Click or tap here to enter text.Tenure Track

Click or tap here to enter text.Full-time Renewable Term Faculty (Ex. Clinical/Professors of Practice)

Click or tap here to enter text.Part-time/Adjunct

Click or tap here to enter text.Other (Please explain) Click or tap here to enter text.

1. Explain what the core program faculty believe to be the value/purpose of the EdD.

Click or tap here to enter text.

1. Briefly describe your proposed program including number of credits/courses, overview of course offerings, degree requirements including milestones.

Click or tap here to enter text.

**EdD Program Design Actions**

1. What actions have been, or will be, taken to redesign/improve your current EdD or design a new EdD?

Click or tap here to enter text.

1. What is the timeline for each step of the (re)design/improvement process?

Click or tap here to enter text.

1. What are the most important changes your program(s) have undergone/will undergo?

Click or tap here to enter text.

1. What are the major challenges/problems you are facing implementing or (re)designing/improving your EdD?

Click or tap here to enter text.

1. What impact do you anticipate your program will have on your
   * Your institution:

Click or tap here to enter text.

* + Your students and graduates:

Click or tap here to enter text.

* + Your community:

Click or tap here to enter text.

1. How will/do you evaluate the effectiveness of your program to prepare scholarly practitioners?

Click or tap here to enter text.

1. What continuous improvement plans are in place for regularly improving the EdD program?

Click or tap here to enter text.

1. How will membership with CPED help support you in the above?

Click or tap here to enter text.

**Commitment & Support**

**Please review the** [*Commitment to Engage and Change*](https://cdn.ymaws.com/www.cpedinitiative.org/resource/resmgr/docs/Commitment2017.pdf)**and be sure your institution is willing and able to engage in the manner outlined.**

1. Is your institution willing to commit to three years of CPED membership? Yes No
2. Does your institution’s budget have adequate funding for:
   1. Annual CPED dues for minimum three years.

Yes No

* 1. Support for at least one or two faculty participation in CPED in annual convening.

Yes No

1. How is your institution prepared to support the CPED Delegate and other faculty in implementing programmatic design changes?

Click or tap here to enter text.

1. How will CPED learning be shared across all faculty members to shift mindsets about the EdD as a scholarly practitioner degree?

Click or tap here to enter text.

1. How will students be supported in this new program?

Click or tap here to enter text.

1. List the types of support your institution will provide to the CPED effort at your institution (e.g., travel funds for individuals to attend annual convenings, graduate assistant and/or release time for the primary faculty member, and/or additional supports that will allow the CPED Delegate and others working on the EdD to participate in CPED on behalf of your institution).

Click or tap here to enter text.

1. Are your institution, faculty, and all EdD programs willing to:
   1. Be committed to and demonstrate implementation of CPED Framework? Yes No
   2. Gather data annually and share with CPED headquarters? Yes No
   3. Share knowledge and learning about your programs at CPED convenings? Yes No
   4. Engage in online discussions and forums? Yes No
   5. Attend annual convening? Yes No

If you would like to provide further information about support of CPED at your institution, please do so below:

Click or tap here to enter text.

1. Please attach letters of support\* from each of the following key stakeholders indicating the below information:

* Dean of the College or School of Education;
* Dean of the Graduate School or Chief Academic Officer;
* Head of the department in which the program is/will be housed;
* Faculty member who will be directly involved/teach in the EdD program.

\*Combined, these letters should demonstrate that members of the institution:

* understand and are ready to commit to engage in the CPED change process
* have financial support for annual dues and travel; and
* are willing to join the consortium for a minimum of three years.

**Interview**

As part of the application process, your institution (Dean and faculty member) may be asked to participate in a **30-minute video or phone interview** with the CPED Executive Director, CPED Board member or CPED committee member. These will be arranged starting in May 2020.