**College of Education and Allied Professions edTPA Appeal**

**Note:** Exceptions to the CEAP edTPA policy will only be granted under exceptional circumstances.

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| --- | --- | --- | --- |
| Name: |  | 92: |  |
| Major: |  | Advisor: |  |
| 1st Score: |  | 2nd Score: |  |

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| --- |
| Explain your first edTPA results and the steps you took to improve your work prior to your second submission. |
|  |
| Explain your second edTPA results. Use scores and feedback to explain areas of need. |
|  |
| What exceptional circumstances support your appeal request? (ex: medical issues, emergency situations) |
|  |
| If granted an appeal, what specific steps will you take and changes will you make to enhance your opportunities for success? |
|  |

Please attach the following:

* edTPA score reports for both submissions
* Completed Intern I evaluation
* Completed Intern II Midterm evaluation
* Completed Intern II Final Evaluation (CTC)

By signing below, you are declaring that your statements are truthful and materials presented are valid.

|  |  |  |
| --- | --- | --- |
| Student  Signature: |  | Date: |

**\*Be sure to proofread and to compile your documentation in an organized and professional manner.**

**Turn in to:**

**Associate Dean Patricia Bricker in Killian 201L,** [bricker@email.wcu.edu](mailto:bricker@email.wcu.edu)

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| --- | --- | --- | --- |
| **For CEAP Dean’s Office Use Only** | | | |
| **Request Received by:** |  | | |
| **Field Supervisor Consult:** | **Yes** | **No** | |
| **Seminar Instructor Consult:** | **Yes** | **No** | |
| **Program Coordinator Consult:** | **Yes** | **No** | |
| **Decision:** |  | | |
| **Dean/Associate Dean Signature:** |  | | **Date:** |