**LEA Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Texas Education Agency Mentor Program Allotment**

Application for SY 2021-22: Scope & Sequence Template (Attachment B)

To be completed by LEAs using an LEA-created mentor training program

File Name: MPA-Cycle2-InsertLEA-B

## Completing Attachment B

This Scope & Sequence template must be completed by LEAs planning to use an LEA-created mentor training program. As a reminder, LEAs using an MPA Approved Provider do not need to complete this template but will still need to upload Attachment B using the Scope & Sequence given by the Approved Provider and include LEA-specific information such as tentative training dates. LEAs are encouraged to review the Mentor Training section of the MPA Guidelines. Refer to the [Scoring Guide](https://tea.texas.gov/sites/default/files/scoring_guide.pdf) for required components of Attachment B.

## Mentor Training Scope & Sequence Template

Fill in the following template to describe the Scope & Sequence that the LEA plans to follow for their mentor training program. Each row is designated for each day of training. As a reminder, mentors and any staff that support or supervise the beginning teacher should attend all mentor trainings. LEAs must demonstrate a minimum total of 18 hours of training in this Scope & Sequence. Refer to the [Day 2 of 3 Scope & Sequence model](https://tea.texas.gov/sites/default/files/scope_sequence_model.pdf) for clarity on the required components and a deeper understanding of successful mentor training.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Approximate Date(s) and Duration (Hours)** | **Alignment to required training topics** | **Objectives & Agenda** | **Mentor Teacher Practice** | **Measures of Success** |
| *List the approximate date and duration of this training (e.g., 6 hours).* | *Check all that apply to the training. Trainings can cover one or more topics per day.* | *What are the specific mentor training objectives (refer to best mentorship practices in the training topics table on Attachment A) for this training?*  *Indicate how much time is allotted to each section of the agenda.* | *What will mentors specifically practice during this training?* | *What will you use and/or observe to measure success of the training?* |
| Date:  Click or tap to enter a date.  Duration:  Click or tap here to enter text. | Check all that apply:  effective mentoring partnerships  coaching cycles  data-driven instruction  lesson planning  learning environment |  |  |  |
| Date:  Click or tap to enter a date.  Duration:  Click or tap here to enter text. | Check all that apply:  effective mentoring partnerships  coaching cycles  data-driven instruction  lesson planning  learning environment |  |  |  |
| Date:  Click or tap to enter a date.  Duration:  Click or tap here to enter text. | Check all that apply:  effective mentoring partnerships  coaching cycles  data-driven instruction  lesson planning  learning environment |  |  |  |
| *Add rows for additional days as needed and delete this text.* |  |  |  |  |