

ID Code# _____

Date Admitted to Graduate School _____

Date Admitted to Program _____

PROPOSED PROGRAM OF STUDIES FOR ESOL/BILINGUAL ENDORSEMENT

Name _____ SSN _____

Address _____
Street City State Zip

Home Phone # _____ Work Phone # _____ Email Address _____

Highest Degree Held: _____ Date: _____ Institution: _____ Major: _____

Oregon Teaching License(s) currently held (Level: Elementary or Secondary and endorsement) _____

Standard/Continuing License Only _____ Master's of Arts or Science in Education _____

Endorsement Option: _____ ESOL only _____ ESOL/Bilingual

COURSE OF STUDY-Competencies

		Institution / Instructor	Term	Grade	Credit (If not at SOU)
Ed 543	FOUNDATION IN SECOND LANGUAGE EDUCATION (3 cr.) <i>Language Foundations/Cultural Foundations</i>				
Ed 544	STRATEGIES/MATERIALS: SECOND LANGUAGE LEARNER (3 cr.) <i>Pedagogy/Assessment</i>				
Ed 545	1ST & 2ND LANGUAGE ACQUISITION/DEVELOPMENT (3 cr.) <i>Language Foundations</i>				
Ed 546	ASSESSMENT/EVALUATION: SECOND LANGUAGE LEARNERS - <i>Assessment/Pedagogy</i>				
Ed 547	IMPACT OF CULTURE IN THE CLASSROOM - <i>Cultural Foundations/Pedagogy/Professional Leadership</i>				
Ed 548	CULTURE AND FAMILY/COMMUNITY INVOLVEMENT (3 cr.) <i>Cultural Foundations/Professional Leadership</i>				
Ed 521	FIELD-BASED PRACTICUM (3 cr.)				
Ed 549	ESOL/BILINGUAL PORTFOLIO (1 cr.) Course restricted to students who have six (6) or fewer credits left to complete the endorsement program.				

Program Approvals: Advisor _____ Date _____

Education Graduate Coordinator _____ Date _____

Dean of Education _____ Date _____

This ESOL/Bilingual program of studies is to be submitted as early in the program as possible. If you are simultaneously working on a Master's Degree and Standard or Continuing Teaching License program or on a Standard License/Continuing Teaching License program, this program of studies should be submitted to the Education Graduate Coordinator for inclusion into your file.

Identify the classification of your ESOL/Bilingual program of studies under one of the following categories:

_____ I am working to add an ESOL/Bilingual endorsement to my current license. I am not working on any additional graduate or teacher licensing programs at this institution.

_____ I am working on an Elementary Standard License (or Continuing Teaching License) program with ESOL/Bilingual as the "Selected Option" on that program.

_____ I am working on a Secondary Standard License (or Continuing Teaching License) program with ESOL/Bilingual as the "Selected Option" on that program.

_____ I am working on an Elementary Master's Degree and Standard License (or Continuing Teaching License program) with ESOL/Bilingual as the "Selected Option" on that program.

_____ I am working on a Secondary Master's Degree and Standard License (or Continuing Teaching License) program with ESOL/Bilingual as the "Selected Option" on that program.

_____ I am currently working on my initial license (in the Master of Arts in Teaching Program, or similar program).

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PRAXIS II: English as a Second Language (#20360): Score (550 required) _____

NOTE: All persons who submit their proposed programs of study for the ESOL/Bilingual endorsement after October 1, 1999, will be required to pass the PRAXIS specialty area exam in order to obtain an Oregon endorsement. Future plans for the SORBEC grant will include a preparation class for the PRAXIS specialty area exam.

Bilingual Competency (for ESOL/Bilingual endorsement): Test Name _____ Date _____ Score _____

Endorsement Completion Date: ESOL only _____ ESOL/Bilingual _____