

Bilingual Authorization - Spanish Approved Program Contract

Date: _____ SJSU ID: _____

Last Name: _____ First Name: _____

Program: _____ Email: _____

----- DO NOT WRITE BELOW THIS LINE -----

| PRE-REQUISITE REQUIREMENTS | | VERIFIED BY: | | | |
|----------------------------|---|-----------------|------------------------------|-------|--------------------|
| Credential | | Expiration Date | | | |
| ELA | _____ YES _____ NO | | | | |
| COURSEWORK | | VERIFIED BY: | | | |
| SJSU Course | Title | Units | Substitution/ Institution | Grade | Semester Completed |
| EDTE 208A or B | Culture, Education and Power for Spanish-English Bilinguals | 3 | | | |
| EDTE 262A or B | Language Methods and Equity for Spanish-English Bilinguals | 3 | | | |
| EDTE 297A or B | Advanced Issues in Bilingual | | | | |

Chair/Program Director Name

Signature

Date