

Bilingual Authorization - Mandarin

Approved Program Contract

Date: _____ SJSU ID: _____

Last Name: _____ First Name: _____

Phone: _____ Email: _____

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

PRE-REQUISITE REQUIREMENTS		VERIFIED BY:			
Credential		Expiration Date			
ELA	_____ YES _____ NO				
COURSEWORK		VERIFIED BY:			
Course	Title	Units	Substitution/ Institution	Grade	Semester Completed
EDTE 208M	Culture, Education and Power for Mandarin-English Bilinguals	3			
EDTE 262M	Language Methods and Equity for Mandarin-English Bilinguals	3			
LANGUAGE PROFICIENCY		VERIFIED BY:			
	CSET LOTE III - Mandarin (165)	Date Passed:			
	OTHER:				
FIELD EXPERIENCE		VERIFIED BY:			
	OTHER:				
NOTES/COMMENTS					

Chair/Program Director Name

Signature

Date