

Certificate / Bilingual Education

All students must meet with the Certificate Program Director, **Dr. Patrick Proctor**, prior to submitting the Certificate Program of Study. Please see below for additional submission guidelines.

NAME _____

Anticipated Completion Date _____

SEMESTER/YEAR

BC ID _____

Course Number and Title	Credits	Summer	Fall	Spring	T/W ²
Required Courses¹					
EDUC7615 Foundations of Bilingual and Dual Language Education	1				
EDUC 7621 Bilingualism, Second Language, and Literacy Acquisition (GRADUATE) OR EDUC 3308 Bilingualism in Schools and Communities (UNDERGRADUATE)	3				
EDUC 7616 Bilingual Literacy and Literature	3				
Total Credits Required for Completion:	7				

¹ Note that per Massachusetts Department of Elementary and Secondary Education requirements, a practicum equivalent of 75 hours is required to be eligible for Massachusetts endorsement. This can be accomplished in the context of your existing practica. Please see your advisor or the Field Placement Office.

² Insert a T (transfer) or W (waiver) as appropriate. If seeking a transfer of credits, you must fill out a Transfer of Credit Request form available online. If requesting a waiver, you must complete a Course Waiver form under the guidance of your faculty advisor.

Submission Guidelines

- **Certificate Only Students:** To be submitted during the second term of enrollment in a certificate only program, prior to the opening of registration for the third term of enrollment.
- **Graduate Program Students:** To be submitted in the semester the certificate is declared.
- Certificates **cannot** be added to your record without meeting with the Certificate Program Director and submitting a signed Certificate Program of Study.

Program Information

- Have you met with the Certificate Program Director? YES NO
- Are you currently an enrolled Boston College Master's or Doctoral Student? YES NO

- If yes, please list the program: _____

Signatures/Approval

STUDENT SIGNATURE_____
Date_____
CERTIFICATE PROGRAM DIRECTOR_____
SIGNATURE_____
ASSOCIATE DEAN, GRADUATE STUDENT SERVICES_____
SIGNATURE

COMMENTS: