

Application for Admissions toward the Bilingual Added Authorization

(For candidates who already hold either a Multiple Subject, Single Subject or Special Education credential)

Last Name _____ First Name _____ Middle Initial _____ Prior Name(s) (including maiden name) _____ Date of Birth ____/____/____ Address _____ City _____ State _____ Zip _____ Personal Email _____ SSU Email _____ Cell Phone () _____ - _____ SSU ID _____ (NOTE: Office will contact applicants to request social security number if not an SSU graduate)

Current Credential Held (please attach a copy) _____

Current Teaching Position: _____

Signature _____ Date _____

Please email this form to: maricela.ibarra@sonoma.edu

For Advisor's Use Only: Admit for Semester/Year _____

Comments:

PATHWAY OPTIONS:

___ **Undergraduate/Integrated Teacher Ed**

___ EDMS 465 ___ CALS 445 ___ CALS 219 ___ SPAN 427 ___ SPAN300(H) ___ SPAN301

___ **Credential PLUS BILINGUAL Authorization**

___ SPAN 300 OR 300H ___ SPAN 301 ___ SPAN 304 OR ___ SPAN 427 OR (CSET Spanish III)

___ EDMS 465 ___ SPAN 427 OR (CSET World Languages IV)

___ CALS 219 ___ CALS445 OR CALS 456 OR (CSET Spanish V)

___ **Post Baccalaureate**

___ EDMS 465 ___ CALS 456 ___ SPAN 427

Approved by _____ Signature _____ Date _____

Copies to:

___ Candidate

___ Credential Office