

100 North First Street Springfield, Illinois 62777-0001

NAME OF CHIEF SCHOOL ADMINISTRATOR	TELEPHONE (Include Area Code)				
ADDRESS (Street, City, State, ZIP Code)	ADMINISTRATOR EMAIL				
	WEBSITE (Optional)				
The governance of					
School Name					
located at					
Street Address, City, State, ZIP Code					
Telephone Number (Include Area Code)					
for instruction in	for the school year.				
Complete second page of form.					

The applicant assures that:

- a) it is an ethnic school, defined in the School Code (105 ILCS 5/2-3.44) as a part-time private school which teaches the foreign language of a particular ethnic group as well as the culture, geography, history and other aspects of a particular ethnic group;
- b) per the requirements of 23 Illinois Administrative Code Part 1.465, each teacher shall possess at least a baccalaureate degree and have completed at least 20 semester hours of credit in the foreign language taught, both of which shall have been awarded by a regionally accredited college or university;
- c) per the requirements of 23 Illinois Administrative Code Part 1.465, the program shall contain at least 120 clock hours of instruction plus outside preparation for each unit of credit issued upon successful completion of the instruction, although less than a full unit of credit may also be awarded in proportion to the amount of instruction received; and
- d) documents to verify each item of assurance are available for review upon request by representatives of the Illinois State Board of Education and/ or by officials of the local public school district to which students seek to transfer foreign language credit(s). Such documents may include school informational brochures, course syllabi, class schedules, and official teacher transcripts.

The applicant understands that:

- a) annual application by an ethnic school for approval of its foreign language shall be made on forms provided by the State Board of Education; and
- b) approval shall be granted on an annual basis, provided that a previously approved ethnic school continues to comply with the minimum standards set forth for such foreign language program approval.

We, the undersigned, attest that the information provided and assured is accurate and true and agree that the Illinois State Board of Education and any public school district to which student credit is to be transferred may, with appropriate notice, visit the foreign language program(s) in operation.

Digital or Original Signature of Governing Board Official

Digital or Original Signature of Chief School Administrator

Application Date

Print Name of Chief School Administrator

ILLINOIS STATE BOARD OF EDUCATION USE ONLY

This Foreign Language Application is:

Approved

Denied

Date

APPLICATION FOR ETHNIC SCHOOL FOREIGN LANGUAGE PROGRAM APPROVAL (CONTINUED)

NAME OF ETHNIC LANGUAGE SCHOOL: _____

PROGRAM ADMINISTRATOR EMAIL: _____

Students must have at least 120 hours of language classes to potentially qualify for foreign language credit at their high schools. If students take more than one class per year, please use a new line for each class.

Complete the table below to demonstrate appropriate coursework:

NAME OF CLASS	TIME & DAY OF CLASS	FIRST DAY OF CLASS	LAST DAY OF CLASS	ACCOUNTING FOR HOLIDAYS, HOW MANY OCCURENCES?	TOTAL HOURS OF CLASS FOR THE ACADEMIC YEAR	
	AND OR					
	AND OR					
	ANDOR					
	ANDOR					
	AND OR					
ADDITIONAL SPECIAL EVENT	DATE	TIME	TOTAL HOURS			
				Please add up all relevant hours of coursework and write the total here:		

APPLICATION FOR ETHNIC SCHOOL FOREIGN LANGUAGE PROGRAM APPROVAL (CONTINUED)

NAME OF ETHNIC LANGUGAE SCHOOL:

PROGRAM ADMINISTRATOR EMAIL: _____

Students must have at least 120 hours of language classes to potentially qualify for foreign language credit at their high schools. If students take more than one class per year, please use a new line for each class.

Complete the table below to demonstrate appropriate coursework:

NAME OF CLASS	TIME & DAY OF CLASS	FIRST DAY OF CLASS	LAST DAY OF CLASS	ACCOUNTING FOR HOLIDAYS, HOW MANY OCCURENCES?	TOTAL HOURS OF CLASS FOR THE ACADEMIC YEA
Conversation and Culture	Wednesday 6-8pm AND COR Saturday 10-12	9/11/2024	6/8/2024	35	70
Intensive writing	Wednesday 4:30-5:30 X AND OR Saturday 8:30-9:30	9/11/2024	6/8/2024	35	70
	AND OR				
	AND OR				
ADDITIONAL SPECIAL EVENT	DATE	TIME	TOTAL HOURS		
Heritage Day	2/8/2025	10:00-4:00	6	Please add up all relevant hours of coursew	ork and write the total he
Community Service Day	5/24/2025	10:00-4:00	6		
				7	<u> 152 </u>