

**ILLINOIS STATE BOARD OF EDUCATION**  
 Career and Technical Education Division  
 100 North First Street, E-240  
 Springfield, Illinois 62777-0001

**APPLICATION FOR ETHNIC SCHOOL FOREIGN LANGUAGE PROGRAM APPROVAL**

NAME OF CHIEF SCHOOL ADMINISTRATOR	TELEPHONE (Daytime) (Include Area Code)
ADDRESS (Street, City, State, Zip Code)	TELEPHONE (Evenings) (Include Area Code)
	FAX (Include Area Code)

The governance of \_\_\_\_\_  
*School Name*

located at \_\_\_\_\_  
*Street Address (City, State, Zip Code)*

\_\_\_\_\_ hereby applies for foreign language program approval by the Illinois State Board of Education  
*Telephone Number (Include Area Code)*

for instruction in \_\_\_\_\_ for the \_\_\_\_\_ - \_\_\_\_\_ school year.  
*Name of Foreign Language Course(s)*

Opening Date of Course(s)	Closing Date of Course(s)	Day(s) of the Week Classes Are Held	Time Classes Are Held

**Complete the reverse side of form.**

The applicant assures that:

- a) it is an ethnic school, defined in Section 2-3.44 of 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) those teaching the foreign language will possess at least a baccalaureate degree and at least twenty semester hours of credit in the foreign language taught awarded by a college or university recognized in accordance with Section 21-21 of the School Code 105 ILCS 5/21-21;
- c) the foreign language program(s) shall contain at least 120 clock hours of instruction plus outside preparation for each unit of credit issued upon successful completion of such 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 local public school district officials 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.

*I, 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.*

\_\_\_\_\_  
**Original** Signature of Governing Board Official

\_\_\_\_\_  
**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

\_\_\_\_\_  
**Original** Signature of Authorized Illinois State Board of Education Agent

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LIST ADDITIONAL SCHOOL SITES BELOW

SCHOOL NAME AND ADDRESS (Street, City, Zip Code)	TELEPHONE (Include Area Code)	NAME OF FOREIGN LANGUAGE COURSE(S)	OPENING DATE OF COURSES	CLOSING DATE OF COURSES	DAYS OF WEEK CLASSES ARE HELD	TIME CLASSES ARE HELD