**RHODE ISLAND COLLEGE**

**FEINSTEIN SCHOOL OF EDUCATION AND HUMAN DEVELOPMENT**

**GRADUATE STUDIES; PLAN OF STUDY**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Name** |  | | **ID#** |  | **Date** |  |
| **Email** |  | **Phone** |  | | | |
| **Department** | *Educational Studies* | | | | | |
| **Program** | *CGS  in Teaching English to Speakers of Other Languages (TESOL)* | | | | | |
| **Concentration** | *Bilingual Education* | | | | | |

Please submit a signed original to the Feinstein School of Education and Human Development (FSHED) Graduate Studies Office.  Students should complete this form with the assistance of and approval of the Graduate Advisor.  Although an applicant may be recommended for acceptance to a graduate program, the applicant cannot be considered an officially accepted degree candidate until an approved Plan of Study is on file in the FSEHD Graduate Studies Office.  Changes in the Plan of Study can be made with the graduate advisor’s approval by completing the Change of Plan of Study Form.

PLAN OF STUDY

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| --- |
| **Course Requirements (21 Credits)** |
| |  |  |  |  | | --- | --- | --- | --- | | *Course No.* | *Course Title* | *Credit Hours* | | |  | |  |  | | Professional Education Component | | | | | TESL 539  TESL 541  BLBC 515 | Second Lang Acquisition Theory and P.                                   3 Applied Linguistics in TESOL   3  Foundations of Education in Bilingual Communities                                               3 | |  | | BLBC 516 | Pedagogy & Practice in Bilingual Education                                                              3 | |  | | BLBC 518  TESL 551 | Biliteracy Instruction for Emergent Bilingual Learners.               3  Assessment of Emergent Bilinguals                                                                           3 | |  | |  | |  | | | Capstone Course | |  | | | TESL 553 | Internship in TESOL and Bilingual Education | 3 | | |  |  |  | | | Total Credit Hours | | 21 | | |

Courses Transferred? YES            NO x             Total Credits Transferred

(If so, form attached) Total Credits 21

Thesis----Yes No x        Comprehensive Assessment---Yes No x

Student Date

Advisor Date

Program Director \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department Chairperson Date

Director of Graduate Studies Date

*In addition, candidates must show proficiency in English and a second language as required for the Bilingual/ Dual Language certificate.*