

Equivalency Certification for Noncredit English as a Second Language

Name: _____ Department: Community Education
 Semester/Year: _____ Discipline/Area: _____

Criteria for Equivalency: The applicant named above meets the criteria for equivalency. This has been verified by review of the applicant's official college transcripts and other materials. (Attach documents used to verify candidate's qualifications.)

Minimum Qualifications:

Bachelor's degree in teaching English as a second language, or teaching English to speakers of other languages, **OR**

Bachelor's degree in education, English, linguistics, applied linguistics, any foreign language, composition, bilingual/bicultural studies, reading, or speech; and a certificate in teaching English as a second language, which may be completed concurrently during the first year of employment as a noncredit instructor, **OR**

Bachelor's degree with any of the majors specified in subparagraph (2) above; and one year of experience teaching ESL in an accredited institution; and a certificate in teaching English as a second language, which may be completed concurrently during the first year of employment as a noncredit instructor, **OR**

Possession of a full-time, clear California Designated Subjects Adult Education Teaching Credential authorizing instruction in ESL.

Criteria for Equivalency:

- A bachelor's in any discipline and either (A), (B), or (C) below:
 (A) twelve semester units of course work related to the subject of the course taught, or
 (B) course work equivalent to a TESL certificate, or
 (C) a teaching credential authorizing instruction in the subject area and substantive (100 hours) of professional experience related to the areas of assignment.

The experience and education that will be applicable will be determined by the department. Candidates must prove that he/she has completed or been accepted to a TESL certificate program.

Rationale: Explain how the applicant's qualifications meet the selected guideline. Qualifications must be verified with appropriate documentation.

Signature of Candidate	Date
------------------------	------

I have reviewed all documentation and recommend approval of regular equivalency certification.

Signature of Department Chair	Date	Signature of Dean	Date
Signature of Appropriate Academic Vice President	Date	Signature of Committee Chair Professional Standards Committee	Date