Date of first review: _____
Subsequent reviews: _____

HAMLINE UNIVERSITY School of Education
Undergraduate License Review Form
Licensure Requirements: French (K-12)

Student Name: _____ Hamline ID#: _____

Phone: _____ E-mail: _____ Education GPA: _____

Year: _____ Major: _____ Major/Specialty GPA: _____

Assessment of Language Proficiency Exam: Call 651-523-2975 for more information.

MTLE: Basic Skills Assessment	Y / N	Date Taken: _____	Date Passed: _____
MTLE: Pedagogy	Y / N	Date Taken: _____	Date Passed: _____
MTLE: Subject Content Knowledge Test	Y / N	Date Taken: _____	Date Passed: _____

Required Coursework **Education Courses**	**Credits**	**Fulfilled**	**Course/Institution** **When Completed/Grade**
EDU 3150 Schools and Society	4	Y / N	_____
EDU 3250 Educational Psychology	4	Y / N	_____
EDU 5620 Education and Cultural Diversity	4	Y / N	_____
EDU 5640 Families, Schools and Communities	2	Y / N	_____
EDU 5690 Theory to Practice 5-8	2	Y / N	_____
EDU 5710 Teaching Literacy in the Middle and High Schools	2	Y / N	_____
EDU 5720 Exceptionality	2	Y / N	_____
EDU 5750 Teaching in Secondary Schools	4	Y / N	_____
EDU 5881 World Language Methods	4	Y / N	_____
EDU 5900 Student Teaching Seminar	2	Y / N	_____
EDU 5960 K-12 Student Teaching	18	Y / N	_____
French Courses			
MODL 1010 The Language Phenomenon	4	Y / N	_____
MODL 1020 Language and Society	4	Y / N	_____
Nine courses beyond Intermediate French (FREN 3220)			
FREN 3420 Reading French	4	Y / N	_____
FREN 3440 French Conversation and Composition	4	Y / N	_____
FREN 3510 France: Literature and Civilization I	4	Y / N	_____
FREN 3520 France: Literature and Civilization II	4	Y / N	_____
FREN 3600 Advanced French Language	4	Y / N	_____
FREN 3620 L'experience africaine	4	Y / N	_____
FREN 3630 L'experience antillaise	4	Y / N	_____
FREN 5400 Problems in Translation	4	Y / N	_____
FREN 5600 Topics in Advanced French Language and Literature	4	Y / N	_____
Language proficiency and assessment of knowledge of French culture		Y / N	
French GPA (needs to be 3.0 or higher prior to student teaching)		Y / N	

_____ _____
Student signature Date

_____ _____
Education Advisor signature Date