

BILITERATE SPANISH-ENGLISH CERTIFICATE PROGRAM APPLICATION

Name:	Last First	Middle	Maiden
Student ID#:	Email Address:	Cell Ph	none: ()
Major(s):		Minor(s):	
Classification:	☐ Freshman ☐ Sophom	ore	
Expected graduati	on date:		
What exposure to	o the Spanish language have y	ou had? Check all that apply	
Translate or tr Attended scho Took Spanish i College course	e Spanish at home with my familianslated/interpreted for parents of olin Spanish-speaking country (n high school in the USA (e (semesters) Please list below IB. If no regular College course	years) years) years) all courses taken as regular courses	or credit received through
Date	Course number and title		ge or University
	xplain)	anish-English Certificate option?	
How did you hear	about the Biliterate Certificate P	rogram?	
Student's signatur	e:	Date:	
Dr. Maribel Lárrag Professor of Spani	sh and Director for the Biliterate al Sciences Department, HuSS	turn application, contact: Spanish-English Certificate Progran	n
For use by Bilitera	nte Certificate Director		
Accepted: \(\sum \)	es No Date:	Date:	
Comments:			