



# JON L. JENMARC, INCORPORATED

Consultants in Education

1350 Belmont Street, Williamsburg Square # 101

Brockton, MA 02301-4330

(V) 508.586.3574 [www.jonljenmarc.com](http://www.jonljenmarc.com) (Fax) 508.586.644



**FALL 2017**

## **EDN 530 Sheltered English Immersion – Teacher Endorsement Course**

**Massachusetts DESE Endorsement in SEI by Endicott College  
CLASS SIZE IS STRICTLY LIMITED and CLASS FILLS QUICKLY!  
Please call the JENMARC office at 508.586.3574 to pre-register.**

**PLEASE USE THE SPECIAL REGISTRATION FORM FOR THIS COURSE**

### **EDN 530 Sheltered English Immersion**

**Endicott College    3 graduate credits    \$750.00/3 GRAD CREDITS    Lisa Reid- Instructor  
Wednesday, September 27 – Wednesday, December 13  
(Course starts online; face-to-face classes are scheduled during the 12 weeks of the course)**

The purpose of this course is to prepare the Commonwealth's teachers with the knowledge and skills to effectively shelter their content instruction so that our growing population of English language learners (ELLs) can access curriculum, achieve academic success, and contribute their multilingual and multicultural resources as participants and future leaders in the 21st century global economy. A field experience component is required as part of this course.

#### Learning Outcomes

Students will be able to:

- effectively carry out their responsibility for the teaching and learning of ELLs as well as to understand the social and cultural issues that contribute to and impact the schooling of ELLs.
- expand their knowledge of how language functions within academic content teaching and learning, and how children and adolescents acquire a second language.
- employ practical, research-based protocols, methods, and strategies to integrate subject-area content, language, and literacy development- per the expectations of the World Class Instructional Design and Assessment (WIDA) English Language Development Standards (ELDS)-and thus to support ELL students' success with all state academic standards.



**JON L. JENMARC, INCORPORATED**  
 Consultants in Education  
 (V): 508.586.3574 (Fax): 508.586.6448  
**ENDICOTT COLLEGE**



**PROFESSIONAL DEVELOPMENT COURSE REGISTRATION FORM**

EMAIL REGISTRATION FORM TO: [fran.jenmarc@gmail.com](mailto:fran.jenmarc@gmail.com) or fax it to 508.586.6448 or mail it to:  
 Jon L. Jenmarc, Inc. 1350 Belmont Street, Williamsburg Square #101, Brockton, MA 02301-4430  
*You will be emailed directions to start the course.*

SEMESTER  FALL  YEAR  2017  Date \_\_\_\_\_ Endicott ID# OR Social Security # \_\_\_\_\_

Name \_\_\_\_\_  Male  Female Date of birth \_\_\_\_\_  
 Last First Initial/Maiden

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (cell) \_\_\_\_\_ (work) \_\_\_\_\_ email \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

**Citizenship:**  U. S. Citizen  Resident Alien  Citizen of \_\_\_\_\_

**Ethnic Origin** (optional):

- Non-Resident Alien  Black, Non-Hispanic  American Indian/Alaskan Native  Other  
 Asian/Pacific Islander  Hispanic  White, Non-Hispanic Explain \_\_\_\_\_

\* These questions are being asked to furnish statistics, as required by the Department of Education

**I am registering for:**  Credit  Non-credit  
 I am a new student.  I have enrolled previously. Last date of attendance \_\_\_\_\_

*Endicott College does not discriminate on the basis of race, creed, national or ethnic origin, or disability in the administration of its education policies, admissions, scholarship and loan programs, employment, or any other rights, privileges or activities involving its students, faculty or staff. The School of Graduate and Professional Studies reserves the right to make changes affecting policies, courses, instructors or other changes deemed necessary.*

Course #	Sect.	Course Title	Cr.	Start Date	Course Fee
EDN 530	PD 01	Sheltered English Immersion-Teacher Endorsement Course	3 grad	9/27/17 - 12/13/17	\$ 750.00
<b>Total Due:</b>					<b>\$ 750.00</b>

I am seeking Endorsement in SEI through Endicott College. YES \_\_\_\_\_ NO \_\_\_\_\_

My MEPID # is: \_\_\_\_\_

I currently hold a License in \_\_\_\_\_ at the \_\_\_\_\_ level.  
 (Subject/Concentration and Grade Level(s)) (Preliminary/Initial/Professional)

**PLEASE ATTACH A COPY OF YOUR ELAR PAGE LISTING YOUR LICENSE INFORMATION.**

**All Fees are Due with Course Registration.**  
**Please make check payable to: Jon L. Jenmarc, Educ Consultants**

Date paid \_\_\_\_\_ Amount paid \_\_\_\_\_ Payment Method:  Check  Money Order  MC/VISA/AMEX  
 Card number \_\_\_\_\_ Expiration date \_\_\_\_\_  
 Cardholder's name \_\_\_\_\_ Signature \_\_\_\_\_