



James I. O'Neill High School
 PO Box 287
 Highland Falls, NY 10928
 845-446-4914 x-2600

The New York State Seal of Biliteracy Application

The New York State Seal of Biliteracy is a formal recognition of High School Graduates who have studied and attained a high level of proficiency in listening, speaking, reading, and writing in one or more languages, in addition to English.

Student Name: _____ Student ID: _____

Guidance Counselor: _____ Native Language: _____

Languages to be considered for recognition:

1. _____

2. _____

Date of entry in High School: _____

Expected Graduation Date: _____

Date of application: _____

 Student Signature

 Parent/Guardian Signature

For Office Use Only:

<p>English Regents Score: _____</p> <p>Grade 11 Average ELA Grade: _____</p> <p>Grade 12 Average ELA Grade: _____</p> <p>AP English Literature Score: _____</p>	<p>NYSESLAT Proficiency Levels</p> <p>Speaking: _____ Reading: _____</p> <p>Listening: _____ Writing: _____</p> <p>Foreign country transcripts reviewed by: _____</p> <p>Average Grade: _____</p> <p>Checkpoint C Course/Grade: _____</p>
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<p>Title of the project: _____</p> <p>Meets criteria for speaking, listening, reading, and writing for English: Yes _____ No _____</p> <p>Meets criteria for speaking, listening, reading, and writing for World Language: Yes _____ No _____</p> <p>Date Seal of Biliteracy Awarded: _____</p> <p>Counselor's Signature: _____ Date: _____</p>	
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