







**SAN LEANDRO UNIFIED SCHOOL DISTRICT  
COURSE PROPOSAL  
SECTION A. COVER PAGE**




<b>1. Course Title: English 1</b> <b>If Title Change, State Old Title: __ Fundamentals</b>	<b>7. Action</b> <input type="checkbox"/> New Course <input type="checkbox"/> Course Revision <input checked="" type="checkbox"/> Title Change Only
<b>2. Date Submitted:</b> <b>June 2015</b>	<b>8. Grade Level(s)</b> <input type="checkbox"/> 6 <input checked="" type="checkbox"/> 9 <input type="checkbox"/> 11 <input type="checkbox"/> 7 <input type="checkbox"/> 10 <input type="checkbox"/> 12 <input type="checkbox"/> 8
<b>3. Transcript Title/Abbreviation(s)</b> English 1 SDC	<b>9. Prerequisites (Please list.)</b> <input checked="" type="checkbox"/> Meets English Graduation Requirements  <input type="checkbox"/> Recommended
<b>4. Transcript Course Code/Course Number :</b> 1181SD	<b>10. Seeking Program Distinction?</b> <input type="checkbox"/> YES (Check one below.) <input checked="" type="checkbox"/> NO <input type="checkbox"/> Honors <input type="checkbox"/> AP <input type="checkbox"/> Other
<b>5. Subject Area</b>  ENGLISH	<b>11. Is this a CTE course?</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <b>If YES, complete Section C</b>
<b>6. Department</b> English	<b>12. Previously approved by UC? NA</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NA for 6th-8th Year approved Year removed
<b>13. UC ELIGIBILITY</b> Already eligible? <input type="checkbox"/> NA for 6th-8th <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO a <input type="checkbox"/> b <input type="checkbox"/> c <input type="checkbox"/> d <input type="checkbox"/> e <input type="checkbox"/> f <input type="checkbox"/> g  Proposing eligibility? <input type="checkbox"/> NA for 6th-8th <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO a <input type="checkbox"/> b <input type="checkbox"/> c <input type="checkbox"/> d <input type="checkbox"/> e <input type="checkbox"/> f <input type="checkbox"/> g Please mark one for approved eligibility or proposed eligibility.	<b>14. Unit Value/Course Credit/Length of Course</b> <input type="checkbox"/> 0.5 (semester or half-year) <input checked="" type="checkbox"/> 1.0 (one year equivalent) <input type="checkbox"/> 2.0 (two-year equivalent) <input type="checkbox"/> Other
<b>15. School Contact:</b> Name: Sally Lewis Phone: 618-4600 Email: <a href="mailto:slewis@slusd.us">slewis@slusd.us</a>	
<b>16. Signatures:</b> Department Chair   Principal: 	<u><b>DISTRICT OFFICE USE ONLY</b></u> Date approved by Board Curriculum Committee  Date approved by Board

**SAN LEANDRO UNIFIED SCHOOL DISTRICT  
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SECTION A. COVER PAGE**

<b>1. Course Title: English 2</b> If Title Change, State Old Title: ___English A	<b>7. Action</b> <input type="checkbox"/> New Course <input type="checkbox"/> Course Revision <input checked="" type="checkbox"/> Title Change Only
<b>2. Date Submitted:</b> June 2015	<b>8. Grade Level(s)</b> <input type="checkbox"/> 6 <input type="checkbox"/> 9 <input type="checkbox"/> 11 <input type="checkbox"/> 7 <input checked="" type="checkbox"/> 10 <input type="checkbox"/> 12 <input type="checkbox"/> 8
<b>3. Transcript Title/Abbreviation(s)</b> English 2 SDC	<b>9. Prerequisites (Please list.)</b> <input checked="" type="checkbox"/> Meets Graduation requirement in English  <input type="checkbox"/> Recommended
<b>4. Transcript Course Code/Course Number :</b> 1281SD	<b>10. Seeking Program Distinction?</b> <input type="checkbox"/> YES (Check one below.) <input checked="" type="checkbox"/> XNO <input type="checkbox"/> Honors <input type="checkbox"/> AP <input type="checkbox"/> Other
<b>5. Subject Area</b>  English	<b>11. Is this a CTE course?</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> X NO <b>If YES, complete Section C</b>
<b>6. Department</b> English	<b>12. Previously approved by UC? NA</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NA for 6th-8th Year approved Year removed
<b>13. UC ELIGIBILITY</b> Already eligible? <input type="checkbox"/> NA for 6th-8th <input type="checkbox"/> YES <input checked="" type="checkbox"/> XNO a <input type="checkbox"/> b <input type="checkbox"/> c <input type="checkbox"/> d <input type="checkbox"/> e <input type="checkbox"/> f <input type="checkbox"/> g <input type="checkbox"/>  Proposing eligibility? <input type="checkbox"/> NA for 6th-8th <input type="checkbox"/> YES <input checked="" type="checkbox"/> XNO a <input type="checkbox"/> b <input type="checkbox"/> c <input type="checkbox"/> d <input type="checkbox"/> e <input type="checkbox"/> f <input type="checkbox"/> g <input type="checkbox"/>  Please mark one for approved eligibility or proposed eligibility.	<b>14. Unit Value/Course Credit/Length of Course</b> <input type="checkbox"/> 0.5 (semester or half-year) <input checked="" type="checkbox"/> X 1.0 (one year equivalent) <input type="checkbox"/> 2.0 (two-year equivalent) <input type="checkbox"/> Other
<b>15. School Contact:</b> Name: Sally Lewis Phone: 618-4600 Email: <a href="mailto:slewis@slusd.us">slewis@slusd.us</a>	
<b>16. Signatures:</b> Department Chair  Principal: 	<b>DISTRICT OFFICE USE ONLY</b> Date approved by Board Curriculum Committee  Date approved by Board



**SAN LEANDRO UNIFIED SCHOOL DISTRICT  
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**SECTION A. COVER PAGE**

<b>1. Course Title: English 3</b> If Title Change, State Old Title: <u>English B</u>	<b>7. Action</b> <input type="checkbox"/> New Course <input type="checkbox"/> Course Revision <input checked="" type="checkbox"/> Title Change Only
<b>2. Date Submitted:</b> June 2015	<b>8. Grade Level(s)</b> <input type="checkbox"/> 6 <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 11 <input type="checkbox"/> 7 <input type="checkbox"/> 10 <input type="checkbox"/> 12 <input type="checkbox"/> 8
<b>3. Transcript Title/Abbreviation(s)</b> English 3 SDC	<b>9. Prerequisites (Please list.)</b> <input checked="" type="checkbox"/> Meets Graduation requirement in English  <input type="checkbox"/> Recommended
<b>4. Transcript Course Code/Course Number :</b> 1381SD	<b>10. Seeking Program Distinction?</b> <input type="checkbox"/> YES (Check one below.) <input checked="" type="checkbox"/> NO <input type="checkbox"/> Honors <input type="checkbox"/> AP <input type="checkbox"/> Other
<b>5. Subject Area</b>  English	<b>11. Is this a CTE course?</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <b>If YES, complete Section C</b>
<b>6. Department</b> English	<b>12. Previously approved by UC? NA</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NA for 6th-8th Year approved Year removed
<b>13. UC ELIGIBILITY</b> Already eligible? <input type="checkbox"/> NA for 6th-8th <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO a <input type="checkbox"/> b <input type="checkbox"/> c <input type="checkbox"/> d <input type="checkbox"/> e <input type="checkbox"/> f <input type="checkbox"/> g  Proposing eligibility? <input type="checkbox"/> NA for 6th-8th <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO a <input type="checkbox"/> b <input type="checkbox"/> c <input type="checkbox"/> d <input type="checkbox"/> e <input type="checkbox"/> f <input type="checkbox"/> g  Please mark one for approved eligibility or proposed eligibility.	<b>14. Unit Value/Course Credit/Length of Course</b> <input type="checkbox"/> 0.5 (semester or half-year) <input checked="" type="checkbox"/> 1.0 (one year equivalent) <input type="checkbox"/> 2.0 (two-year equivalent) <input type="checkbox"/> Other
<b>15. School Contact:</b> Name: Sally Lewis Phone: 618-4600 Email: slewis@slusd.us	
<b>16. Signatures:</b> Department Chair:  Principal: 	<b>DISTRICT OFFICE USE ONLY</b> Date approved by Board Curriculum Committee  Date approved by Board

**SAN LEANDRO UNIFIED SCHOOL DISTRICT  
COURSE PROPOSAL**

**SECTION A. COVER PAGE**

<b>1. Course Title: English 4</b> If Title Change, State Old Title: ___English C	<b>7. Action</b> <input type="checkbox"/> New Course <input type="checkbox"/> Course Revision <input checked="" type="checkbox"/> Title Change Only
<b>2. Date Submitted:</b> June, 2015	<b>8. Grade Level(s)</b> <input type="checkbox"/> 6 <input type="checkbox"/> 9 <input type="checkbox"/> 11 <input type="checkbox"/> 7 <input type="checkbox"/> 10 <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 8
<b>3. Transcript Title/Abbreviation(s)</b> English 4 SDC	<b>9. Prerequisites</b> (Please list.) <input checked="" type="checkbox"/> Meets Graduation requirement in English  <input type="checkbox"/> Recommended
<b>4. Transcript Course Code/Course Number :</b> 1481SD	<b>10. Seeking Program Distinction?</b> <input type="checkbox"/> YES (Check one below.) <input checked="" type="checkbox"/> XNO <input type="checkbox"/> Honors <input type="checkbox"/> AP <input type="checkbox"/> Other
<b>5. Subject Area</b>  English	<b>11. Is this a CTE course?</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> X NO <b>If YES, complete Section C</b>
<b>6. Department</b> English	<b>12. Previously approved by UC? NA</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NA for 6th-8th Year approved Year removed
<b>13. UC ELIGIBILITY</b> Already eligible? <input type="checkbox"/> NA for 6th-8th <input type="checkbox"/> YES <input checked="" type="checkbox"/> XNO a <input type="checkbox"/> b <input type="checkbox"/> c <input type="checkbox"/> d <input type="checkbox"/> e <input type="checkbox"/> f <input type="checkbox"/> g <input type="checkbox"/>  Proposing eligibility? <input type="checkbox"/> NA for 6th-8th <input type="checkbox"/> YES <input checked="" type="checkbox"/> XNO a <input type="checkbox"/> b <input type="checkbox"/> c <input type="checkbox"/> d <input type="checkbox"/> e <input type="checkbox"/> f <input type="checkbox"/> g <input type="checkbox"/>  Please mark one for approved eligibility or proposed eligibility.	<b>14. Unit Value/Course Credit/Length of Course</b> <input type="checkbox"/> 0.5 (semester or half-year) <input checked="" type="checkbox"/> X 1.0 (one year equivalent) <input type="checkbox"/> 2.0 (two-year equivalent) <input type="checkbox"/> Other
<b>15. School Contact:</b> Name: Sally Lewis Phone: 618-4600 Email: slewis@slusd.us	
<b>16. Signatures:</b> Department Chair   Principal: 	<b><u>DISTRICT OFFICE USE ONLY</u></b> Date approved by Board Curriculum Committee 8/18/15 Date approved by Board