

Name _____ SID _____

List all French language courses you have taken, are currently taking, or will take at Berkeley by the time you depart for the EAP program.

Course Number (e.g.) FRENCH 4	Course Title Intermediate French	Units 4	Grade P(A-)	Term & Year Fall 2015
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Coursework Taken at Another Institution

List all French language courses you have taken, are currently taking, or will take at other institutions by the time you depart for the EAP program. Do not include courses taken in high school.

Institution (e.g.) Ohlone College	Course Number FRENCH 1	Course Title Beginning French	Units 4	Grade (A-)	Term & Year Fall 2014
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Supplemental Information

- I studied French in high school for _____ years.
- I have other exposure to French language (i.e.: lived abroad, spoke language at home, attended French "lycee" high school in the U.S., etc.). Please give details below:

Language Evaluation

If you believe you have gained equivalent language proficiency through experience in a French-speaking environment in the U.S. or abroad, please have your language skills evaluated.

1. Email Carol Dolcini in UC Berkeley's Department of French to request an appointment for a language proficiency assessment. The department's email address is fredept@berkeley.edu.
2. Print a copy of the [Language Evaluation Form](#) and bring it to your exam. The results of your evaluation will be recorded on the Language Evaluation Form.
3. Upload a copy of your completed Language Evaluation Form with your EAP application.