

To Be Completed By Student

UCEAP Language Evaluation Form - Spanish

<u>To The Applicant</u>: This form is only for Spanish second language learners or heritage/native speakers who have not completed (and are not currently enrolled in) any language courses at the UC. You must meet with a UC Language Instructor during their office hours to complete the UCEAP Language Evaluation Form.

<u>To The Evaluator</u>: Thank you for completing a language evaluation for this applicant to the University of California Education Abroad Program. The student will be engaged in intensive language study or studying an academic discipline taught in another language for an extended period of time in a cultural immersion setting. Your answers to the questions and rubric below will form an essential part of our selection and language placement process. Please return this evaluation directly to the student. We encourage you to discuss your evaluation and recommendations with the applicant.

Student Name:										-				
UC Email:	Application deadline:													
UCEAP Country:	EAP Country:						UCEAP Program:							
Minimum Language requi	rement: Maximum Language requirement (if applicable):													
LANGUAGE EVALUATO	OR INS	STRUC	CTION	<u>S:</u>										
Please assess the applicant's	•	-	-				-		-					
this evaluation is not confid student's eligibility for place		•		•		•		uating. Thi	is evaluatio	on will determine th				
student's engionity for place	emem (on the C	JC Edu	cation.	Auroau	riogian	1.							
	Beginner			Intermediate			Advanced			Superior				
	Low	Mid	High	Low	Mid	High	Low	Mid	High					
Pronunciation														
Oral Fluency														
Aural Comprehension														
Reading Comprehension														
Writing Ability														
Command of Grammar														
Please select and complete	the mo	ost ann	ropria	te state	ement(s	s) below	for this	student.						
☐ This student has learned Stanguage study at UC.			-						quar	ters/semesters of				
☐ This student is a <u>heritage</u>	Spanisl	ı speak	<u>er</u> .											
☐ This student is a <u>native S</u>	oanish s	speaker	and ha	s lingui	istic ski	ills eauiv	alent to t	hose of na	tive speake	ers in the host coun				
\Box I recommend the student														
1 recommend the student	uo tiic i	OHOWH	ng to pi	срагс (c.g. co	urse reco	mmenda	nons). 1 ica	ise specify					
Please include any further	comm	ents ab	out th	e stude	nts' la	nguage s	skills on	the back o	f this forn	n (optional)				
Evaluator Signature	Title/Position						Depart	ment						
Print name	Evaluator Email						Date							