



Name of Applicant: _____	Country: _____
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REPORT ON PROFICIENCY IN MANDARIN

THIS FORM SHOULD BE COMPLETED BY ONE OF THE FOLLOWING:

- A Lecturer/ Professor of Chinese Language Program in your home institution
- A Professor of Chinese whose Native Language is Chinese

PURPOSE OF REPORT: The person named is applying to the Consortium for Study Abroad in Taiwan Program at a college or university in the United States. Consideration must be given to each applicant's Chinese Proficiency. This report form seeks a reliable evaluation of the applicant's present command of Mandarin Chinese, including comments as to additional language training which appears necessary.

Please indicate briefly how the evaluation was conducted.

Method: _____ TEST: _____

(X) the appropriate boxes to indicate your opinion of the applicant's present ability in Mandarin from the standpoint of the language proficiency usually needed for effective pursuit of studies in Taiwan.

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|---|--|
| <p>(a) <u>Speaks Mandarin</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Fluently and colloquially <input type="checkbox"/> With ease but with occasional errors <input type="checkbox"/> Haltingly with frequent errors <input type="checkbox"/> No ability | <p>(c) <u>Understands Written Mandarin</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Comprehends advanced level material <input type="checkbox"/> Comprehends intermediate level material <input type="checkbox"/> Comprehends elementary level material <input type="checkbox"/> No ability |
| <p>(b) <u>Understands Spoken Mandarin</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> With good comprehension <input type="checkbox"/> With some hesitation <input type="checkbox"/> Simple vocabulary only <input type="checkbox"/> Not at all | <p>(d) <u>Expresses Thoughts in Written Mandarin</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> With Fluency and facility <input type="checkbox"/> With ease but ungrammatically <input type="checkbox"/> On an elementary level only <input type="checkbox"/> No ability |

Additional Comments: _____

EVALUATION AND REPORT PREPARED BY:
NAME(print): _____
TITLE: _____
SIGNATURE: _____ **DATE:** _____