



7, place de Fontenoy, 75352 Paris 07 SP
telephone: (33.1) 45.68.10.00

APPLICATION FOR FELLOWSHIP

CERTIFICATE OF LANGUAGE KNOWLEDGE

Name of candidate.....	Language.....
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Address of candidate.....
.....

(1) ABILITY TO UNDERSTAND

- (a) Understands without difficulty when addressed at normal rate.....
- (b) Understands almost everything, if addressed slowly and carefully.....
- (c) Requires frequent repetition and/or translation of words and phrases.....
- (d) Does not understand spoken language.....

(2) ABILITY TO SPEAK

- (a) Speaks fluently and accurately and is easily intelligible.....
- (b) Speaks intelligibly, but is not fluent or altogether accurate.....
- (c) Speaks haltingly, and is often at a loss for words and phrases.....

(3) ABILITY TO WRITE

- (a) Writes with ease and accurately.....
- (b) Writes slowly and/or with only a moderate degree of accuracy.....
- (c) Writes with difficulty and makes frequent mistakes.....

(4) READING ABILITY AND COMPREHENSION

- (a) Reads fluently, with full comprehension.....
- (b) Reads slowly, but understands almost everything he reads.....
- (c) Reads with difficulty, and only with frequent recourse to the dictionary.....
- (d) Cannot read.....

(5) TECHNICAL LANGUAGE

Certain fellowships require a particular knowledge of specialized or technical language. In such cases, please evaluate candidate's ability with reference to paras. 1, 2, and 4 above.

- (6) Please indicate any further facts about candidate's language knowledge which may be of value in the development of his programme:

LANGUAGE TEST HAS BEEN MADE BY Address:.....

Name:.....

Title:.....

..... Date:.....

COMMENTS:.....
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