BI-LINGUAL CAPABILITY QUESTIONNAIRE

Name: __________________________

1. Do you have bi-lingual capability? Yes____ No____

If yes, please indicate: Language____________ Fluent ____ Conversational ____

Language____________ Fluent ____ Conversational ____

2. Have you ever lived (not visited) in another country? Yes_____ No____

If yes, list country and number of months: Country____________ # of months_____

Country____________ # of months_____

3. Have you:

a. studied abroad? Yes____ No____

If yes, list country and number of months:

Country____________ # of months_____

Country____________ # of months_____

b. taken any high school language courses? Yes_____ No____

If yes, list language and number of years:

Language____________ # of years_____

Language____________ # of years_____

c. completed a Rosetta Stone course? Yes_____ No____

If yes, list language and indicate if you passed the course:

Language____________ Did you pass?_____

d. taken a college language course? Yes_____ No____

Language________________________ # of terms_____

Language________________________ # of terms_____

Academic year(s) course(s) completed: Fr ___ Soph ___ Jr ___ Sr ___

4. Are you a foreign language major? Yes____ No____

MSD 101-R