

Arizona Languages Articulation Task Force [LATF]

FORM FOR VERIFICATION OF LANGUAGE PROFICIENCY

PURPOSE: This form is intended for use when a student is seeking to demonstrate 2nd, 3rd, or 4th semester foreign language proficiency in any "human language, other than English, not including computer languages," and he /she qualifies for criteria #4 on the LATF Criteria list.

A student can demonstrate language proficiency in a **language other than English** with the completion of a standard language test recognized by the institution with a grade of C or better **at the appropriate level**. A community college faculty member, certified in Arizona to teach in the language under consideration, can certify a student's language proficiency.

How to use: Upon completion of the exam, if the student adequately demonstrates the proficiency level in all five skills identified in the LATF Learning Outcomes, the faculty member verifies and signs this form. Then the form is forwarded to the institution's REGISTRAR's office for proper documentation on the student's transcript.

Student Name: _____ **ID#:** _____

Institution: _____ **Date:** _____

~~For~~ For students pursuing a degree that requires **2nd semester** proficiency in a language other than English, see **section 1**

~~For~~ For students pursuing a degree that requires **3rd semester** proficiency in a language other than English, see **section 2**

~~For~~ For students pursuing a degree that requires **4th semester** proficiency in a language other than English, see **section 3**

I _____ (Faculty name) certify that I hold a current, *Regular* teaching certificate* in _____ (Language(s) of certification) by the Arizona State Board of Community Colleges and that I am currently in the employment of _____ (Institution).

** In special circumstances, a faculty member who can adequately certify proficiency may hold only a Special or District Specific Certificate. In these cases, a co-signature of the appropriate department chair or faculty supervisor is required.*

Name/Type of test being taken: _____

Section 1

In this capacity I affirm that _____ (Student Name) has demonstrated the equivalent of **2nd semester** proficiency in _____ (Language).

Section 2

In this capacity I affirm that _____ (Student Name) has demonstrated the equivalent of **3rd semester** proficiency in _____ (Language).

Section 3

In this capacity I affirm that _____ (Student Name) has demonstrated the equivalent of **4th semester** proficiency in _____ (Language).

Examiner Name (print) _____ **Examiner signature:** _____

If different from the Faculty who is certifying language proficiency.

Faculty name (print): _____ **Academic Discipline:** _____

Faculty signature: _____ **Date:** _____
(Co-signature, if needed)