



## Language Proficiency Recommendation\*

Academic Year 20 \_\_\_\_ – 20 \_\_\_\_

### ■ Applicant's information

Last name:	<input type="text"/>	First name:	<input type="text"/>
Concordia ID:	<input type="text"/>	Program	<input type="text"/>
Language of study at the host institution:	<input type="text"/>		
<input type="checkbox"/>	Language competency is adequate for successful study		
<input type="checkbox"/>	Language competency is adequate for successful study if certain condition(s) are met (details in comments below)		
<input type="checkbox"/>	Language competency is inadequate for successful study		

### ■ Comments

Design | Marketing Communications | P100461

Department Advisor Name

Department Advisor Signature

Department

CMLL     Concordia International

Date (MM/DD/YYYY)

\*To be completed by the Department of Classics, Modern Languages and Linguistics for all the languages except French. The latter should be completed by Concordia International.