UC 9748 08S Page 1 or 4

RECEIVED APR 1 1 2008

APPROVED MAY 1 4 2008

To: CLASS Undergraduate Studies Committee

From: Sarah Fishman Date: 10 April 2008

Re: Foreign Language Waiver Policy

After much consideration, discussion, review of other university's policies and practices, and review of one of the language proficiency exams available to our students, Patrick Daniel and I recommend formal approval of the interim policy we have devised regarding foreign language waivers that is outlined in the attached documents.

To be as clear as possible, there are now policies in place regarding 4 SEPARATE issues having to do with our language requirement.

1. Waivers. THIS IS THE ONLY MATTER COVERED BY THE ATTACHED FORMS. Students can document foreign language proficiency at the sophomore (2000) course level for languages not taught at the University of Houston in a variety of ways clearly outlined in the attached documents. They will NOT get credit for the language courses and will still be expected to complete the total number of hours required to graduate.

This memo does not change the three different issues listed below, which continue to be governed by existing policies:

- 2: Placement, students will continue to work with Measurement and Evaluation services regarding placement in UH language classes.
- 3: Credit by exam. The policies are clearly outlined in the Undergraduate Studies catalogue. Students can only earn credit in the languages covered by those policies.
- 4. **Substitution**. Students with a documented learning disability must go through a process, working with the Center for Students with Disabilities, testing services, and a committee that reviews such requests. The must take 6 hours of courses to substitute for the language requirement. I have final approval and have the current list of allowed course substitutions for the 6 hour foreign language requirement.



UC 9748 08S Page 2 or 4

UNIVERSITY TESTING SERVICES FOREIGN LANGUAGE REQUIREMENT WAIVER REQUEST FORM

Last Name	First Name	Middle Name
Mailing Address: (street)	(City/State)	(Zip Code)
		<u> </u>
PeopleSoft ID#	Contact Phone Nu	ımber
	William Control of the Control of th	
Major	Email Address	
Advisor's Name Email	address Telephone	Number
I am basing my waiver on my profic		(language
requested to be waived) with one of t	the following (Check One):	
High School Transcript	•	
Foreign Language Achie		
Certification of Evaluation	n by a Faculty Member	
FOR O	FFICE USE ONLY	,
	TITOL OSL OTILE	
This student has met the Foreign Lan	onage Waiver Requirements by fi	lfillino
High School Transcript	gaage warver resquirements by re	
Foreign Language Achiev	vement Test	•
Certification of Evaluation	n by a Faculty Member	
·		
	Data	
Coordinator, University Testing Servi	ices Date	
Coordinator, University Testing Servi	ices Date	
Coordinator, University Testing Servi	ices Date	

UC 9748 08S Page 3 or 4

UNIVERSITY TESTING SERVICES FOREIGN LANGUAGE REQUIREMENT WAIVER GUIDELINES FOR FACULTY ASSESSMENT

Thank you for agreeing to administer a language proficiency examination. This procedure is made available to University of Houston students who may have demonstrable proficiency in a language not formally taught on our campus. Students who earn a waiver will not have to take additional coursework in another language as would otherwise be required for their degree. This procedure does not award credit by examination; students who earn the waiver must sill complete the required number of credit hours for their degrees. Students applying for a waiver must demonstrate language skills equal to those acquired by students who have earned 6 hours of 2000-leve (sophomore/second year level) credit in a foreign language. Your examination of the candidate should cover three areas of proficiency: conversational ability, reading comprehension, and the ability to communicate in writing.

The University of Houston has established the following guidelines to assist you in completing this examination and in certifying the results. Please do not hesitate to contact me at any time during the process if I may be of assistance.

Conversation:

The student should be adequately fluent in the language so as to carry on a straightforward conversation on several topics of everyday life. Students should not only be able to respond to questions, but also to initiate or sustain a conversation or to develop a brief monologue regarding a situation the examiner describes or suggests.

Reading:

The student should be able to read a passage from a newspaper or document of comparable difficulty and understand its substance.

Writing:

The student should possess a reasonable control of spelling, inflection, and syntax of the foreign language and should demonstrate these abilities in writing a short paragraph, letter, or essay on a topic of everyday life for which the examiner suggests the topic. The writing should be done in the presence of the examiner.

If you are satisfied that the candidate merits a waiver please provide us with a letter of support and complete the attached Faculty Assessment form. In this letter indicate your own background in the tested language and give us a brief description of the nature of the examination you administered (e.g., type of writing sample, length or difficulty level of reading sample, etc.). Include your overall estimation of the student's proficiency as well as any other pertinent details as you see fit. It is not necessary to return actual test materials or results to us. Your letter should be addressed to me at the location listed below. Again, we very much appreciate your willingness to participate in this process.

Patrick Daniel, Executive Director Learning and Assessment Services University of Houston Houston, Texas 77204-3025 713-713-5434

UC 9748 08S Page 4 or 4

UNIVERSITY TESTING SERVICES FOREIGN LANGUAGE REQUIREMENT WAIVER FACULTY CERTIFICATION OF ASSESSMENT

Student: Last Name	First Name	Middle Name
	a di kacamatan 1912 di Kabupatèn Kabupatèn Kabupatèn Kabupatèn Kabupatèn Kabupatèn Kabupatèn Kabupatèn Kabupat Kabupatèn Kabupatèn	
Mailing Address: (street)	(City/State)	(Zip Code)
en e		· · · · · · · · · · · · · · · · · · ·
PeopleSoft ID#	Contact 1	Phone Number
Toopiesell 12 II	Conduct	
Email Address:		Major
Expected Graduation Date:	Semester	Year
am requesting a waiver of the fo	reign language requirement	for a Bachelor of Arts degree in
	•	·
he following major	I am basing	my waiver on my proficiency in
(1)	anguage proficiency to be as	sessed). I have contacted and
rranged to be tested by the follow	ving faculty member to evalu	ate my language proficiency:
aculty's Name:		
itle:		
aculty's Address:		
,		
hone #:		•
FOR	OFFICE USE O	NLY
This student has met	t the Foreign Language Waiv	ver Requirements (Letter attache
·		
This student did not	meet the Foreign Language	Waiver Requirements
aculty (Print)		Date
aculty – Signature		Date