

# **SPEAC (Summer Programs East Asian Concentration)**

## **Intensive Chinese/Japanese Language Programs**

Department of East Asian Languages and Literatures  
National East Asian Language Resource Center  
East Asian Studies Center  
The Ohio State University

### **2009 Application Procedures and Instructions for Non-OSU Students**

#### **BEFORE YOU BEGIN:**

- |  |            |           |
|--|------------|-----------|
| <b>(1) ARE YOU <u>NOT</u> A CURRENTLY OSU STUDENT?</b>                         | <b>YES</b> | <b>NO</b> |
| <b>(2) ARE YOU APPLYING FOR Intensive Chinese or Japanese Language Program</b> | <b>YES</b> | <b>NO</b> |

*If you answered "YES" to both questions, please go on.*

*If you answered "No" to question (1), please go back and select the application form for OSU student..*

*If you answered "No" to question (2), please go back and select the application form for the Teacher Training Program.*

Dear Applicant,

We appreciate your interest in SPEAC programs. The following is an application packet, including the application form and two reference forms. **Please fill out the form clearly, especially the last 4 digits of your SS# and email address, and return all required materials listed on the following checklist to SPEAC before the deadline. All program related information will be sent out by email.** If you have any questions throughout the application process, do not hesitate to contact SPEAC by email at [speac@osu.edu](mailto:speac@osu.edu). More SPEAC information and application materials are available at <http://deall.osu.edu/programs/summerPrgm/default.cfm>

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**Deadline: All materials must be received by SPEAC office by Friday, March 20, 2009**

#### **Application Materials to be mailed in or sent to:**

**SPEAC**

**Department of East Asian Languages and Literatures**

**The Ohio State University**

**398 Hagerty Hall**

**1775 College Rd.**

**Columbus, OH 43210**

#### **Application for Admission Checklist** (Please use this as a checklist and keep it for your records.)

- (1) **The completed application form.** Be sure to sign the application form. Your application will not be processed without it.
- (2) **Two reference forms** filled out by the appropriate referees. If you are returning the letters of reference yourself, make sure the referees sign across the seal of the envelope
- (3) **Official transcript(s)** from ALL post-secondary institutions attended. You can use your OSU Advising Report as your OSU transcript.
- (4) **A non-refundable application fee of \$40, made payable to SPEAC, the Ohio State University.**

#### **Notice of Admission to SPEAC**

We will send out admission notices between late April or early May. If you have been accepted, you will also at this time receive a housing request form, meal information, and other pertinent information.

**For questions, contact SPEAC at [speac@osu.edu](mailto:speac@osu.edu)**

# SPEAC (Summer Programs East Asian Concentration)

## Intensive Chinese/Japanese Language Programs

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The Ohio State University

### APPLICATION FORM

Language (check one)  Chinese  Japanese      Level sought (Check one)  I  II  IV

#### I. Personal Information

1). Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Last Name      First Name      Middle Name      Month / Date / Year

2). U.S. Social Security Number \_\_\_\_ - \_\_\_\_ - \_\_\_\_      Sex: Male  Female

3). Are you Ohio resident? Yes  No

4). Current Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State (Prefecture, Province, etc.) \_\_\_\_\_

Zip (Postal) Code \_\_\_\_\_ Country \_\_\_\_\_

5). Telephone (home) \_\_\_\_\_ Cell Phone \_\_\_\_\_

6). Permanent Address (if different from above address) \_\_\_\_\_

City \_\_\_\_\_ State (Prefecture, Province, etc.) \_\_\_\_\_

Zip (Postal) Code \_\_\_\_\_ Permanent Phone \_\_\_\_\_

7). E-mail address \_\_\_\_\_

8). Country of Citizenship \_\_\_\_\_ Place of Birth (City/Country) \_\_\_\_\_ / \_\_\_\_\_

9). Is English your native language?       Yes       No

10). If you are not a U.S. citizen, check one:

\_\_\_\_ Immigrant. Alien registration number: A  Date received \_\_\_\_\_

\_\_\_\_ Refugee or asylum or other (specify) \_\_\_\_\_ Date received \_\_\_\_\_

11). Upon whom are you dependent for more than one-half of your financial support? (***If you are over 18 years old, and not a dependent, please skip item 11, 12, 13, and go to Item 14 directly***)

Parent /Guardian/Spouse       Self – I am financially independent       Other

12). The person indicated in item 11 has lived in Ohio:

From birth to present       Never       From \_\_\_\_\_ to \_\_\_\_\_  
Month/Year      Month/Year

13). Name of the person you indicated in item 11, or, if you are financially independent, name a person to notify in case of emergency:

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Phone: \_\_\_\_\_

Number and street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

14). Emergency Contact (name) \_\_\_\_\_

Relationship (mother, etc.) \_\_\_\_\_ Phone \_\_\_\_\_

15). What is your ethnic background? (check one)  Black, non-Hispanic  American Indian or Alaskan native  Asian or Pacific Islander  Hispanic  White, non-Hispanic

16). Per the student's designation the University may or may not release certain information about each student to the public or through the student directory. Please indicate whether or not you agree to Personal Information Release.  Yes  No

## II. Registration Information

Have you ever registered and paid fees at OSU?  Yes  No

If yes, give last quarter and year attended \_\_\_\_\_

major/CAP \_\_\_\_\_ college/school \_\_\_\_\_

Have you requested a transfer from one undergraduate enrollment unit (college, school or division) to another within the past year?  Yes  No

Have you resided in Ohio for the past 12 consecutive months?  Yes  No

Are you a dependent child of a parent (or legal guardian) or a spouse of a person who has accepted full-time employment in Ohio?  Yes  No

If male, aged 18 to 26; have you registered with the selective service?  Yes  No

If yes, enter your selective service number \_\_\_\_\_

Are you presently under suspension or dismissal from any post-high school education program, including Ohio State?  Yes  No

If yes, please attach a statement of explanation.

Is your cumulative point hour ratio (CPHR) a 2.00 (C) or higher on a 4.00 for all previous college work in the United States?  Yes  No

## III. Educational background (List all post-secondary institutions attended, beginning with current or most recent)

Institution (Name)	Address (City, Country)	Dates Attended From (Mo/Yr) To (Mo/Yr)	Major or Program	Degree	Date Received (Mo/Yr)

## IV. Language and East Asian Related Background

List any formal language courses you have taken, including Chinese and/or Japanese: (attach an additional sheet if necessary)

Course Title	Institution	Dates Taken	Credits Received


List the learning materials you have used for the language you plan to study this summer:

\_\_\_\_\_

\_\_\_\_\_

Including Chinese and Japanese, please list the languages you have studied other than your native language. Indicate (circle) your approximate level of competency: (1- poor, 2-fair, 3-good, 4-excellent)

Language	Speaking	Listening	Reading	Writing
	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4
	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4
	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4
	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4

Have you taken the SAT II test in Japanese or Chinese?  Yes  No

If yes, when? \_\_\_\_\_ What was your composite score? \_\_\_\_\_

What do you consider to be your native language? \_\_\_\_\_

What language is spoken most frequently at your home? \_\_\_\_\_

List all East Asia related courses, other than language courses, which you feel are relevant to your studies this summer. List a) courses on literature and culture and b) other courses and study with cultural relevance. (attach an additional sheet if necessary.)

Course	Institution	Dates Taken	Credits Received

Have you ever lived or studied in a foreign country  Yes  No

If yes, where and how long? \_\_\_\_\_

## V. Self-Evaluation

Please rate yourself in the following areas: (check the appropriate box)

	Outstanding	Very good	Good	Fair
Motivation				
Maturity				
Ability to adapt to new and different environments				
Competitive drive				
Organization				
Ability to express one's self				

## VI. Personal Statement

Please describe in English your purpose in applying for the SPEAC intensive language program (Chinese or Japanese) and your academic and professional goals as they relate to the program. Limit your comments to 3200 characters (including space). We suggest that you work on this statement using a word-processing software and attach it to this application.

## VII. References

Please request two people who, in their professional capacities, can talk about your character and academic readiness to undertake the intensive study of Chinese or Japanese to complete the reference forms online. Please download the related reference form and give it to your reference. No family members, please list the names of the two people you have asked for letters of reference.

Name	Title	Institution

## VIII. Health Insurance:

You are automatically enrolled in single Comprehensive coverage unless you complete the online waiver form by the deadlines. You will be required to provide proof of comparable coverage with the waiver request. The online waiver form is located at [www.ureg.ohio-state.edu](http://www.ureg.ohio-state.edu). Information regarding the health insurance requirement, the Student Health Insurance Plan, and the deadline for enrollment/withdrawal is located at [www.shc.ohio-state.edu/shi](http://www.shc.ohio-state.edu/shi).

## IX. Statement of Intention and Signatures

The SPEAC Language Programs are intensive studies in the Chinese or Japanese language. The course of study requires individuals to be in classes from four to five hours each day, and to spend between several hours daily preparing for classes. Students participating in this program are not permitted to take other classes or hold full time jobs without prior written permission; part-time employment is also strongly discouraged.

SPEAC program fees do not include Student Health Insurance, housing and meals.

Participant's failure to abide by these provisions may result in his/her disenrollment in SPEAC.

I fully understand the nature of SPEAC and will abide by the requirements and guidelines of the program.

Signature: \_\_\_\_\_ Date \_\_\_\_\_

I affirm that the information I have provided on this application form and any additional information I submit related to the admissions/financial aid process is complete, accurate, and true to the best of my knowledge. If applicable, I authorize each high school and each college or school I have attended to release academic and personal information, as well as my employer to verify my dates of employment. I agree to submit other materials that are required for an admission application. I agree that as a student I will be subject to The Ohio State University Code of Student Conduct. I understand that furnishing false or incomplete information on any part of this application material or other related materials may result in cancellation of admission or registration or both.

Signature: \_\_\_\_\_ Date \_\_\_\_\_