

SPEAC (Summer Programs East Asian Concentration)

Teacher Training Program for Teaching of Chinese/Japanese

Department of East Asian Languages and Literatures

National East Asian Language Resource Center

East Asian Studies Center

The Ohio State University

TO BE COMPLETED BY APPLICANT

Applicant's Name: _____

The Family Educational and Privacy Act of 1974 opens many student records for the student's inspection. The law also permits the student to sign a waiver relinquishing his/her right to inspect letters of recommendation. Indicate below whether you waive this right. Check one of the boxes.

I waive my right to view this reference.

I do not waive my right.

Date _____ Signature _____

I have asked this referee to evaluate my: English Japanese Chinese N/A (Please circle one)

TO BE COMPLETED BY REFEREE

The above individual is applying to SPEAC's Teacher-Training Program for Teaching of Japanese/Chinese, a highly intensive program requiring a serious commitment and the ability to be productive under pressure. Please consider these requirements as you fill out this reference form.

Your Name: _____ Title: _____

Institution: _____

City: _____ State: _____ Zip: _____

Phone: _____ email: _____

1. How long have you known the applicant and in what capacity?

2. Please rate the applicant in the following areas according to the scale below.

	5 (very high)	4 (high)	3 (average)	2 (low)	1 (minimal)	X (unknown)
Analytical ability	5	4	3	2	1	X
Creativity	5	4	3	2	1	X
Organization	5	4	3	2	1	X
Level of commitment	5	4	3	2	1	X
Discipline for intensive studying	5	4	3	2	1	X
Emotional stability	5	4	3	2	1	X

3. Has the applicant asked you to rate her/his English, Japanese, or Chinese language ability? Yes No

If said "No," please skip this item and go on to Item 4.

If you said "Yes," please do so according to the scale below.

Language in which you are evaluating the applicant's ability (please select one): English / Chinese / Japanese

	5 (very high)	4 (high)	3 (average)	2 (low)	1 (minimal)	X (unknown)
Ability to engage in professional discourse	5	4	3	2	1	X
Ability to engage in daily conversation	5	4	3	2	1	X
Sensitivity to different aspects of language use	5	4	3	2	1	X
Ability to read professional documents	5	4	3	2	1	X
Ability to read simple documents	5	4	3	2	1	X

4. Any additional comments that you can provide about the applicant would be greatly appreciated. If you prefer, you may attach an additional sheet with your comments.

Either return this form to the applicant, in an envelope signed across the seal, or if you prefer, mail it to: SPEAC, The Ohio State University, 398 Hagerty Hall, 1775 College Rd., Columbus, OH 43210

For questions, please contact SPEAC at speac@osu.edu.

Sing below to indicate that you have completed the reference form to the best of your knowledge and to acknowledge that you are providing the information to be used by the Ohio State University for admission purposes.

Signature: _____ **Date:** _____