

SPEAC (Summer Programs East Asian Concentration)

Teacher Training Programs for Chinese/Japanese Language

Department of East Asian Languages and Literatures

National East Asian Languages Resource Center

East Asian Studies Center

The Ohio State University

2009 Application Instructions and Procedures for OSU Applicants

BEFORE YOU BEGIN:

- | | | |
|--|-----|----|
| (1) ARE YOU A CURRENTLY REGISTERED OSU STUDENT? | YES | NO |
| (2) ARE YOU APPLYING FOR Teacher Training in CHINESE or JAPANESE | YES | NO |

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 non-OSU student..

If you answered "No" to question (2), please go back and select the application form for the Intensive Chinese/Japanese language 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. More SPEAC information and application materials are available at <http://deall.osu.edu/programs/summerPrgm/default.cfm>

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 and early May by email. 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

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Application Form

Training program in which language? (check one) Chinese Japanese

I. Personal Information

Name _____ Date of Birth _____
Last Name First Name Middle Name Month / Date / Year

Name in Japanese / Chinese (if applicable) _____

The last 4 digits of your U.S. Social Security Number _____ Sex Male Female

Current Mailing Address _____

City _____ State (Prefecture, Province, etc.) _____

Zip(Postal)Code _____ Country _____

Telephone (home) _____ Telephone (work) _____

Permanent Address (if different from current address) _____

City _____ State (Prefecture, Province, etc.) _____

Zip(Postal)Code _____ Country _____

Permanent Phone _____ Fax _____

OSU E-mail address _____ Country of Citizenship _____

Place of Birth (City/Country) _____ / _____ Permanent country of residence _____

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

Emergency Contact (name) _____

Relationship (mother, etc.) _____ Phone _____

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

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 presently under suspension/dismissal from any post-high school education, 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. Experience in Teaching Chinese/Japanese (Begin with current or most recent)

| Institution | Dates | Materials Used | Levels Taught |
|-------------|-------|----------------|---------------|
| | | | |
| | | | |
| | | | |

V. Other Relevant Professional Work Experience (Begin with current or most recent)

| Company/Institution | Location | Dates | Position/Duties |
|---------------------|----------|-------|-----------------|
| | | | |
| | | | |
| | | | |

Have you attended a US institution of higher education as a full-time degree candidate? Yes No

| Evaluate your own ability in English according to the scale below. (Circle your response.) | | | | | | | |
|--|----------|-------------------|---------|-------------|-------------|---|--|
| 5 (Very High) | 4 (High) | 3 (Above 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: (e.g. letters, memo) | 5 | 4 | 3 | 2 | 1 | X | |
| Ability to present own thinking in coherent writing: | 5 | 4 | 3 | 2 | 1 | X | |

Vib. If you are not a native speaker of the target language (Japanese or Chinese), provide information for the following.

Target language for teacher training in SPEAC (check one) Chinese Japanese

| Evaluate your ability in the target language according to the scale below. (Circle your response.) | | | | | | | |
|--|----------|-------------------|---------|-------------|-------------|---|--|
| 5 (Very High) | 4 (High) | 3 (Above 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: (e.g. letters, memo) | 5 | 4 | 3 | 2 | 1 | X | |
| Ability to present own thinking in coherent writing: | 5 | 4 | 3 | 2 | 1 | X | |

VII. 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 copying it to the following field once completed. Please attach your personal statement to this application.

VIII. 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 |
|------|-------|-------------|
| | | |
| | | |

IX. 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. 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.

X. 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:** _____