

THE 2022 UNIVERSITY OF MICHIGAN SUMMER LANGUAGE PROGRAM

Spring Half-term: May 3-June 24, 2022; Summer Half-term: June 29-August 19, 2022

Application for U-M students in Greek or Latin Language studies:

Students must complete the application process when requesting the Program Fee option (not-for-credit status). All other current U-M students may register for their Spring term or Summer term language course(s) via Wolverine Access without submitting an application.

Applications are accepted on a rolling basis until the first day of class.

All application materials should be emailed to classics@umich.edu:

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Please direct all questions to:

Phone: (734) 764-0360

Email: classics@umich.edu

THE 2022 UNIVERSITY OF MICHIGAN SUMMER LANGUAGE PROGRAM

Students admitted for the Program Fee (not-for-credit) Option:

- Payment must be made by credit card. This is the only form of payment we can accept under the current circumstances. Details about how to make your credit card payment will be included in your acceptance communication.
Program Fees are not paid through Student Accounts or UM-Sponsors.
- Please note it is the responsibility of the student to ensure that payment is made.
- If a third party will be covering the cost of the program fee it is the responsibility of the student to ensure that payments are made in a timely manner.
- All other questions should be directed to the language department.
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THE 2022 UNIVERSITY OF MICHIGAN SUMMER LANGUAGE PROGRAM

Application for U-M students applying for the Program Fee Option in Greek or Latin Language studies.

(To be completed by applicant. Please print legibly.)

1. Name _____ 2. U-M I.D. _____
(Last) (First) (Middle)
2. Applying for:
❖ Spring Term (5/3- 6/24) _____ Summer Term (6/29-8/19) _____
❖ Course Name: _____ Course Number: _____
3. Permanent Address- including city and zip code:

4. Permanent Telephone Number _____
5. Current Address –including city and zip code _____
6. Current Address Good until _____
7. Current Telephone Number _____ E-mail address (required): _____
8. State of Legal Residence _____ County of Legal Residence _____
How long has the above state been your legal residence? Month _____ Year _____
9. For which term were you admitted to U-M? _____
10. In which U-M school/college are you currently enrolled _____
Undergraduate: Upper division _____ Lower division _____
Graduate: Department _____ Pre-candidate _____ Candidate _____
11. Check one:
a. I wish to take this course for credit (If a. you will be required to register on the first day of class.) **OR**
b. I wish to take this course as a non-credit Program Fee student. (You will receive a Certificate of Attendance rather than a transcript after the successful completion of the course.)

I certify that the above statements are true.

Student's Signature _____ Date _____

THE 2022 UNIVERSITY OF MICHIGAN SUMMER LANGUAGE INSTITUTE

Language Report for U-M students. (Only required for applicants to 2nd year or higher courses.)

This form must to be sent by the recommender to

All application materials should be emailed to classics@umich.edu:

Please direct all questions to:

Phone: (734) 764-0360

Email: classics@umich.edu

Applications are accepted on a rolling basis until the first day of class.

Name of Applicant:

Name of Language Teacher:

Applicant: sign here to waive your right of access to the information below.

Position/Title: _____

Dept./Institution: _____

Title of course(s) applicant plans to take:

If this evaluation is not based on courses you taught to the applicant, please indicate how your evaluation was determined (e.g., “by means of a test,” “through daily contact,” etc.).

_____ Language teacher’s signature

_____ Date

<i>Language courses you taught to applicant</i>			
Course title			
Specific language or dialect taught			
Number of weeks in course			
Number of contact hours per week			
Textbook or teaching materials			

<i>Applicant’s Language Abilities: Check the appropriate box in each category: “1” is the lowest level; “5” is the highest.</i>		1	2	3	4	5
Speaking and Listening	Aural Comprehension					
	Fluency of Self-Expression					
	Vocabulary Control					
	Pronunciation					
Reading	Grasp of Grammar					
	Knowledge of Vocabulary					
	Reading Speed					
Writing	Vocabulary Control					
	Control of Sentence Structure					

Indicate any special linguistic strengths or weaknesses:

How does this student compare with others at the same level?

Please feel free to supplement your comments or provide other pertinent information on the back of this sheet.

THE 2022 UNIVERSITY OF MICHIGAN SUMMER LANGUAGE PROGRAM

Recommendation for U-M students.

This form must to be sent by the recommender to

All application materials should be emailed to classics@umich.edu:

Please direct all questions to:

Phone: (734) 764-0360

Email: classics@umich.edu

Applications are accepted on a rolling basis until the first day of class.

Name of Applicant:

Name of Recommender:

Applicant: sign here to waive your right of access to the information below.

Position/Title: _____

Dept./Institution: _____

Title of course(s) applicant plans to take:

Evaluation background: If this evaluation is not based primarily on courses you taught to the applicant, please indicate how your evaluation was determined (e.g., "by means of a test," "through daily contact," etc.). If necessary, please use the back of this form to supplement your comments or for any additional information.

Recommender's signature

Date

**THE 2022 UNIVERSITY OF MICHIGAN SUMMER LANGUAGE
PROGRAM Personal Statement**

First name _____ Last name _____ Date _____

Applying for course _____

Please type your personal statement below and include it with your application materials for summer language study.