

## Evaluation of Second Language Competency

RE: \_\_\_\_\_  
Student's Name Major UHM ID #

TO: Advising Center for the College of Arts, Languages & Letters  
Sakamaki Hall, Room D202, 2530 Dole Street, Honolulu, HI 96822  
Email: advising@hawaii.edu

FROM: Department of \_\_\_\_\_

### Department Evaluation, Findings and Recommendation

The student's competency in \_\_\_\_\_  
Language

was evaluated by \_\_\_\_\_ on \_\_\_\_\_.  
Examiner's Name Date

1. \_\_\_\_\_ The student is a **native speaker/signer**, including oral/oral-visual and written command of the language, and has thus fulfilled UHM's second language requirement.
2. \_\_\_\_\_ The student is **bilingual**, including oral/oral-visual and written command of both languages, and has thus fulfilled UHM's second language requirement.
3. \_\_\_\_\_ The student has demonstrated competence through **the 202 level or beyond** and has thus fulfilled UHM's second language requirement. Language study may continue beginning with the following course level: \_\_\_\_\_.
4. \_\_\_\_\_ The student has demonstrated competence **below the 202 level** and in order to fulfill UHM's second language requirement will need to continue language study beginning with the following course level: \_\_\_\_\_.

Comments:

\_\_\_\_\_  
Signature of Department Chair

\_\_\_\_\_  
Date