CERTIFICATION OF FULFILLMENT OF LANGUAGE REQUIREMENT

Department of Political Science

INSTRUCTIONS

1. Give this form to the person giving your exam.
2. Either you or the examiner should give the completed form to the Department Assistant for forwarding to the Graduate Director.
3. Be sure to get a completed copy and keep it in your files.

Student Name: ____________________________
  Last  First  Middle

Language: ____________________________

Date of Examination: ____________________________

The student named above demonstrated sufficient competence in the language named above to meet University requirements.

Name of Examiner: ____________________________

Signature: ____________________________ Date: __________

Received and noted.

Graduate Director: ____________________________ Date: __________