



# INTERNSHIP USA ENGLISH LANGUAGE ABILITY FORM

Applicant Last Name:

First Name:

Middle Name:

### English Instructor:

Please complete the following document assessing the participant's English ability.

### Participant:

Once form has been completed, upload to your application.

### INELIGIBLE

- 1: Beginner** No ability to express oneself verbally in English. Knows only a few words.
- 2: Elementary** Very basic communication limited to simple words. Difficult to understand, requiring repetition.
- 3: Lower-intermediate** Basic communication. Limited understanding and vocabulary. Frequent hesitation. Slow speaking speed.
- 4: Intermediate** Effective and independent use of language in familiar situations. Can discuss general, everyday tasks and past experiences.

### ELIGIBLE

- 5: Upper-intermediate** Speaks in full sentences with minimal pauses and some complex sentence structure. Extensive vocabulary.
- 6: Advanced** Always understandable. Speaks with ease, conversation is fluid and easy. Rarely misunderstands vocabulary.
- 7: Fluent** Native English Speaker. Language is used fluently, accurately, and appropriately.

Additional comments about the student's knowledge of English and his/her ability to function in an English-speaking workplace:

University Stamp/Seal:

Name (please print):

Name of Educational Institution (please print):

Signature: