

Confirmation of Language Proficiency

For Overseas Exchange and PROMOS Scholarship Applications

Student Information

Name, First (and Middle) Name(s)

Student ID

School

Study Program

_____ I II III IV V _____

Language Proficiency

This section must be completed by a professor or instructor of French/ Portuguese/ Spanish at the University of Siegen.

Name of Person Completing the Form

Title

School / Department / Service Unit

E-mail

Phone

Please select the language and indicate your opinion of the student's present language proficiency in accordance with the Common European Frame of Reference for Languages (CEFR):

Language: French Portuguese Spanish

Language Level: A1 A2 B1 B2 C1

The language proficiency may be verified and documented based on the following criteria. Please check all that apply:

- performance in language class
- language test completed at the above school/department/service unit
- native speaker

Place, Date

Signature and Stamp