



COLLEGE OF LIBERAL  
ARTS AND SCIENCES

DEPARTMENT OF HISTORY

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## FOREIGN LANGUAGE REQUIREMENT FORM

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**STUDENT NAME:**

**EMAIL:**

**FIELD:**

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**LANGUAGE 1:**

**METHOD OF  
COMPLETION:**

**NATIVE SPEAKER:**

**EXAM:**

**DATE COMPLETED:**

**FACULTY GRADER:**

**PREVIOUS  
DEGREE IN  
FOREIGN  
LANGUAGE:**

**DEGREE AND  
INSTITUTION  
(DOCUMENTATION  
REQUIRED)**

**PREVIOUSLY  
PASSED  
GRADUATE  
LANGUAGE  
REQUIREMENT:**

**DEGREE AND  
INSTITUTION  
(DOCUMENTATION  
REQUIRED)**

**OTHER:**

**DATE OF APPROVAL  
BY GRADUATE  
AFFAIRS COMMITTEE:**

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**LANGUAGE 2:**

**(IF APPLICABLE)**

**METHOD OF  
COMPLETION:**

**NATIVE SPEAKER:**

**EXAM:**

**DATE COMPLETED:**

**FACULTY GRADER:**

**PREVIOUS  
DEGREE IN  
FOREIGN  
LANGUAGE:**

**DEGREE AND  
INSTITUTION  
(DOCUMENTATION  
REQUIRED)**

**PREVIOUSLY  
PASSED  
GRADUATE  
LANGUAGE  
REQUIREMENT:**

**DEGREE AND  
INSTITUTION  
(DOCUMENTATION  
REQUIRED)**

**OTHER:**

**DATE OF APPROVAL  
BY GRADUATE  
AFFAIRS COMMITTEE:**

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**SIGNATURE(S) OF:**

**DIRECTOR OF GRAD**

**STUDIES/ DATE:**

**EXAM GRADER 1:**

**EXAM GRADER 2:**