

The University of Maryland, Arabic Flagship Program



THE LANGUAGE FLAGSHIP

Undergraduate Application for Admission, Fall 2011

I. CONTACT INFORMATION

First Name: _____ Last Name: _____ UID: _____

Mailing Address: _____ Apt/Unit #: _____

City: _____ St: _____ Zipcode: _____

Permanent Address: _____ Apt/Unit #: _____

City: _____ St: _____ Zipcode: _____

Email Address: _____ Phone #: _____

Citizenship Status: Us Citizen Permanent Resident Non-Citizen Other: _____

Are You A Maryland Resident? Yes Non-Resident International

II. ACADEMICS/LANGUAGE STUDY

Institution Of Current Enrollment: _____

Current Year At UMD: Incoming Freshman Sophomore Junior Senior GPA: _____

Major(S): _____

Minor(S): _____

List all Arabic language courses in which you are currently enrolled:

Course	Textbook	Hours Per Week

List all Arabic language courses you have previously completed:

Course	Hours/Week	No. of Weeks	Institution	Year

II. ACADEMICS/LANGUAGE STUDY (continued)

List all Arabic language textbooks used and the units/chapters covered in the course of your Arabic studies:

List any Middle Eastern countries visited, purpose of the visit, year & duration:

List other languages studied and respective levels of proficiency:

LISTENING	READING	WRITING	SPEAKING
<input type="checkbox"/> ELEMENTARY	<input type="checkbox"/> ELEMENTARY	<input type="checkbox"/> ELEMENTARY	<input type="checkbox"/> ELEMENTARY
<input type="checkbox"/> INTERMEDIATE	<input type="checkbox"/> INTERMEDIATE	<input type="checkbox"/> INTERMEDIATE	<input type="checkbox"/> INTERMEDIATE
<input type="checkbox"/> HIGH INTERMEDIATE	<input type="checkbox"/> HIGH INTERMEDIATE	<input type="checkbox"/> HIGH INTERMEDIATE	<input type="checkbox"/> HIGH INTERMEDIATE
<input type="checkbox"/> ADVANCED	<input type="checkbox"/> ADVANCED	<input type="checkbox"/> ADVANCED	<input type="checkbox"/> ADVANCED
<input type="checkbox"/> NATIVE COMPETENCE	<input type="checkbox"/> NATIVE COMPETENCE	<input type="checkbox"/> NATIVE COMPETENCE	<input type="checkbox"/> NATIVE COMPETENCE
<input type="checkbox"/> ELEMENTARY	<input type="checkbox"/> ELEMENTARY	<input type="checkbox"/> ELEMENTARY	<input type="checkbox"/> ELEMENTARY
<input type="checkbox"/> INTERMEDIATE	<input type="checkbox"/> INTERMEDIATE	<input type="checkbox"/> INTERMEDIATE	<input type="checkbox"/> INTERMEDIATE
<input type="checkbox"/> HIGH INTERMEDIATE	<input type="checkbox"/> HIGH INTERMEDIATE	<input type="checkbox"/> HIGH INTERMEDIATE	<input type="checkbox"/> HIGH INTERMEDIATE
<input type="checkbox"/> ADVANCED	<input type="checkbox"/> ADVANCED	<input type="checkbox"/> ADVANCED	<input type="checkbox"/> ADVANCED
<input type="checkbox"/> NATIVE COMPETENCE	<input type="checkbox"/> NATIVE COMPETENCE	<input type="checkbox"/> NATIVE COMPETENCE	<input type="checkbox"/> NATIVE COMPETENCE

Mark the statements below that apply to you:

- I am a heritage speaker and speak Arabic at home. List dialect(s): _____
- I have attended school in an Arabic-speaking country. Where? _____
- My parents are from an Arabic-speaking country. List country(ies): _____
- I have undertaken religious instruction in Arabic. Where? _____

III. ESSAYS

Please answer the below essays and include them as separate attachments to your application, limiting your response to 500 words for each essay.

Please provide a statement explaining your immediate academic objectives and your long term professional goals. Discuss how Arabic fits into your academic and career plans and explain what makes you prepared to and capable of reaching Superior proficiency in Arabic. Please also address your experience working/studying/or living in a diverse community.

Please provide a statement about a time when you overcame a problem and what interpersonal skills you used to solve this problem, along with how this demonstrates your resilience and leadership skills.

IV. RECOMMENDATION FORM – ARABIC FLAGSHIP PROGRAM, UNIVERSITY OF MARYLAND

TO THE STUDENT: Complete the information below and provide this form to an academic reference of your choosing. The reference should be an instructor who is familiar with your performance in *Arabic*, has judged your academic abilities, and has or will award you a grade in a foreign language course. Your reference should complete the Teacher Recommendation Form below and return it to you in a sealed envelope with his/her signature across the seal. If you are not a student, please consult the AFP Program Coordinator regarding options for references.

First Name: _____ **Last Name:** _____ **UID:** _____

Email Address: _____ **Phone #:** _____

OPTIONAL: *I hereby waive any rights of access to this recommendation under the Family Educational Rights and Privacy Act of 1974, University of Maryland policy, or any other law, or regulation. I understand that the Arabic Flagship Program does not require me to execute this waiver and is willing to review my application whether or not I sign it.*

Signature _____
Date

TO THE INSTRUCTOR/RECOMMENDER: The University of Maryland’s Arabic Flagship Program offers a comprehensive Arabic language and culture program designed to help students develop Superior proficiency while pursuing an undergraduate degree in a major of their choice. Entry to this program is highly competitive, and students who are accepted are eligible for merit-based financial awards.

The AFP selection committee will consider the following criteria, among others, in making admissions decisions: Arabic proficiency, instructor recommendation, and the ways in which a student will add to the depth and diversity of the AFP. This program is appropriate for students with the ambition, commitment, and intellectual promise to pursue a Middle East-related profession. Accepted students will benefit from the academic excellence and opportunities offered through this program. ****Please return this form to student in a sealed envelope with your signature across the flap.***

First Name: _____ **Last Name:** _____

Title: _____ **Institution:** _____

Mailing Address: _____ **Ste/Unit#:** _____

City: _____ **St:** _____ **Zipcode:** _____

Email Address: _____ **Phone #:** _____

How long have you known this student, and in what capacity?

What courses have you taught to this student? When?

IV. RECOMMENDATION FORM (continued)

Recommendation of this applicant for Arabic Flagship Program admission:

- STRONGLY RECOMMEND
- GENERALLY RECOMMEND
- RECOMMEND WITH RESERVATIONS (EXPLAIN BELOW):
- DO NOT RECOMMEND (EXPLAIN BELOW):

Please rate this applicant on the following: (10 = a student in the top 5% of students you have ever taught)

	<i>PLEASE CIRCLE ONE</i>									
	<i>LOW</i>					<i>HIGH</i>				
	1	2	3	4	5	6	7	8	9	10
MOTIVATION & COMMITMENT	1	2	3	4	5	6	7	8	9	10
MATURITY	1	2	3	4	5	6	7	8	9	10
CLASS PARTICIPATION	1	2	3	4	5	6	7	8	9	10
PERFORMANCE ON HOMEWORK	1	2	3	4	5	6	7	8	9	10
ATTENDANCE & ATTITUDE	1	2	3	4	5	6	7	8	9	10
ABILITY TO LEARN NEW CONCEPTS	1	2	3	4	5	6	7	8	9	10
LANGUAGE LEARNING APTITUDE	1	2	3	4	5	6	7	8	9	10
CURRENT SKILL IN ARABIC	1	2	3	4	5	6	7	8	9	10

Based on class performance, aptitude, drive, and skills, how likely is it that this applicant will reach Superior Proficiency or better in Arabic:

- Certainly
 Highly Likely
 Possibly
 Unsure
 Not Likely

Please attach a letter of recommendation elaborating on the ratings above and answering the following questions:

Why do you feel this applicant will or will not be able to reach Superior proficiency in Arabic?

What differentiates this student from the average hard-working student in your class?

What other factors should the selection committee take into account in evaluating this applicant?

 NAME TITLE

 SIGNATURE DATE