Wenzao Ursuline University of Languages

CELT Application Form

Application Date:

(yyyy/ mm/ dd)

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| --- | --- | --- | --- |
| Class |  | Student ID Number |  |
| Name |  | Contact Phone Number |  |
| E-mail |  | | |
| Application to: | * Re-take grade, □fall semester/ □spring semester, Level * Makeup grade, □fall semester / □spring semester, Level * Switching to different class section * Others, please specify: | | |
| Please select available time slot(s) | |  |  |  | | --- | --- | --- | | □ Year One | Level 1A~4A | Tue. 13-15:00, Wed. 8-10:00, Thur. 10-12:00 | | Level 5~9 | Tue. 13-15:00, Wed. 8-10:00 | | □ Year Two | Level 2A~5A | Mon. 8-10:00, Tue. 10-12:00, Wed. 10-12:00 | | Level 5~9 | Mon. 8-10:00, Wed. 10-12:00 | | □ Year Three | Level 3~9 | Mon. 13-15:00, Thur. 8-10:00 | |  |  |  | | | |
| Description | 1. You are a: □current student/ □resuming student/ □super senior/ □transfer student 2. The current level of General English is Level \_\_\_ 3. Please ensure there is no time conflict. If there is, please indicate the reason:   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    (If you have an elective course which meets at the same time, please drop it first.)   1. Score for CSEPT or other English Proficiency Tests (please note which): | | |
| Applicant’s Signature |  | | |
| Offices for Notification |  | | |