

IAESTE - Language CertificateThis sheet must be completed and sent with the Student Nomination if required.

Tick Language to be tested

English French German Spanish Other Please specify		
Surname:	First name:	
Nationality:	Study Course:	
How long have you studied this Language?	Last Class:	
Examinations Achieved and Grade: Please provide additional Certificates if available	Dates of Examinations:	
To be completed by the Examiner		
Knowledge of Required Language (Please tick one box for each of the four language sections)		
 Comprehension Understands conversation and reads without difficulty Understands almost everything spoken slowly and clearly Understands with difficulty Cannot follow conversation and written word 		
2. Speaking Speaks fluently, correctly and is easily used to see the second but it is not completely correctly and is easily used to see the second but it is not completely correctly speaks haltingly with many mistakes Cannot speak this language		
3. Writing Writes accurately with ease Writes slowly with occasional errors Writes with difficulty and makes many errors Has no written ability in this Language		
4. Reading Reads quickly with understanding Reads slowly, understanding only some of the text Has difficulty understanding and must look up many words Cannot understand simple texts		
Overall Conclusion □ Excellent □ Good □ Fair □ Poor		
Additional Comments:		
Examiner:	Position:	
Place and Date:	Signature:	