

# COMMUNITY LANGUAGE PROGRAM WINTER 2018

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Preferred Method of Contact: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Gender:  Female  Male

Organization: \_\_\_\_\_ Occupation: \_\_\_\_\_

Do you have any physical restrictions that we should be aware of? If so, please specify: \_\_\_\_\_

How did you hear about the Rassias Center? :  Word of Mouth  Web Page  Brochure  Dartmouth  
 Valley News  Other \_\_\_\_\_

How did you hear about this semester's CLP program? :  Word of Mouth  Web Page  Brochure  Dartmouth  
 Valley News  Other \_\_\_\_\_

Have you ever taken the Community Language Program or another course with us? If so, please list: \_\_\_\_\_

**Language choice:**  French  German  Italian  Spanish  English Grammar & Pronunciation  
**Language Self Evaluation (see below):** 1 2 3 4

Please provide details on your experience with the target language (course work and/or life experience). Include class level and when taken. Our teachers will use this information as part of your placement in an appropriate class.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

What is your native language? \_\_\_\_\_

Please list other languages which you speak or have studied, and to what extent:

\_\_\_\_\_

**Photo Release:** By submitting this form, I hereby give permission for any images captured by photo or video during all activities to be used in editorial or promotional publications for the Rassias Center of Dartmouth College and waive any rights of compensation or ownership thereto.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## PAYMENT

CREDIT CARD	OTHER PAYMENTS
<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> Discover <input type="checkbox"/> Diners Club International  Account# _____ Expires _____ Signature _____	Please indicate by checking a box and providing corresponding information if necessary:  <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Purchase Order Payable to: <b>The Rassias Center</b> Mail to: <b>6071 Blunt, Suite 315, Hanover, NH 03755</b>

**Course Tuition: French, German, Italian, and Spanish: \$300, English Grammar & Pronunciation: \$375**

**Enroll Online:** If you are paying by Credit Card, you may enroll online at [rassias.dartmouth.edu](http://rassias.dartmouth.edu) (click on "Community Language Programs Winter 2018" under "Current Offerings")

### LANGUAGE SELF EVALUATION

Please choose the number that you think best represents your conversational skills in the language in which you are enrolling then select that number on the Language Self Evaluation portion of the Enrollment Form:

1	2	3	4
None/very limited	Can communicate basic information	Can express myself in short phrases	Can converse and express myself in sentences