

**Student Application Form
for a Substitution Package for the L&S Language Requirement**

Please provide the committee with the following information.

Please provide your responses in the fillable PDF below.

Name: _____

Class Standing: _____

Local Address: _____

Major: _____

UW ID or SSN: _____

Local Phone: _____

Anticipated graduation date: _____

UW Email _____

1. What is your disability?

2. When was your disability diagnosed?

3. Are you receiving or have you received treatment, accommodation, or services for your disability? If so, include that information.

4. If so, how effective have these accommodations/services been for you in general?

5. Provide a description of your foreign language experience, including:
- the number of years/semesters of previous foreign language studies
 - grades for each course taken (may be provided via high school/college transcripts)
 - academic or tutorial support you may have received
 - modification of the course standards or activities (if any)
 - provision of accommodation (if any)

6. In what way do you feel your disability specifically interferes with foreign language learning such that a course substitution is warranted?

7. OPTIONAL: What alternative educational experience and/or coursework would you propose to fulfill the intent of the foreign language requirement in the College of Letters and Science? (Be sure to review the section on appropriate packages before responding to this.)