

OU Arabic Language Flagship Partner Program

The University of Oklahoma
International Programs Center
729 Elm Avenue, Hester Hall, Room 150
Norman, OK 73019

Phone: 405.325.2343 Fax: 405.325.7454



The following are additional required items with every application for the program:

- 1. Current official transcript**
- 2. Two academic letters of recommendation** at least one of which should be from an Arabic instructor if you are studying/have studied Arabic
- 3. Statement of purpose**

Please submit all parts of your application at the same time. The only exception to this is your letters of recommendation which are to be sent directly by the recommenders. Incomplete applications will not be processed.

Current official transcript

Please submit an official copy of the transcript of current and previous courses taken

Academic letters of recommendation

At least one of the two letters should be from an Arabic teacher if you are studying/have studied Arabic before; fill out a *recommendation and waiver* form for each referee

Statement of purpose

On a separate sheet of paper (typed, 500 words maximum) briefly describe your motivation and commitment to complete the entire Arabic Flagship program and how you plan to integrate Arabic language learning into your academic and career development. Please mention any previous experiences you have had of studying Arabic

Mailing address

Please mail or submit the completed application to: OU Arabic Flagship Program, International Programs Center, 729 Elm Avenue, Hester Hall, Room 150, Norman, OK 73019

Application deadline

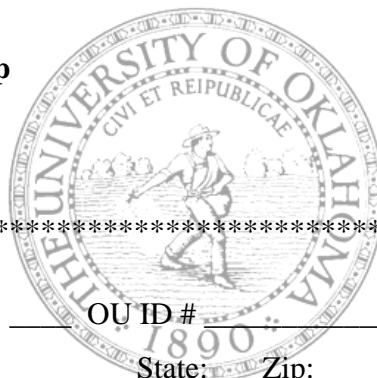
The DEADLINE for the Arabic Flagship Program for new applicants for Spring 2010 is November 15, 2009. Your application should be submitted to International Programs Center front office by close of business (5:00 pm) on that day.



THE LANGUAGE FLAGSHIP

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**OU Arabic Language Flagship
Program Application
Section I**



Last Name: _____ First: _____ M.I.: _____ OU ID # _____

Local Address: _____ City: _____ State: _____ Zip: _____

Permanent Address: _____ City: _____ State: _____ Zip: _____

Local Phone: () _____ Home Phone: () _____ Email _____

Date of Birth: ____ / ____ / ____ Country of Birth: _____ Citizenship: _____

Sex: Male Female College: _____ Major: _____ G.P.A.: _____

Classification: Fr. Soph. Jr. Sr. Grad. Anticipated Graduation Date: _____

Are you an Oklahoma Resident? Yes No

Have you applied for the program before? Yes No Are you receiving financial aid? Yes No

Please specify any financial aid or scholarships you are receiving (e.g. Nat'l Merit, Pell, etc.):

List any honors, recognition or achievements:

List any campus or extracurricular activities and previous travel experience:

What language do you speak at home?

English _____

Arabic _____ If so, what dialect? _____

Other _____

List the names of your academic references:



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**OU Arabic Language Flagship
Program Application
Section II**

1. If any, please provide all information related to Arabic courses that you have completed:

Name of course	Number of Hours Per Week	Number of Weeks	Name of Institution	Textbooks used	Lessons/Units Covered	Grade Assigned

2. If any, please provide all information related to Arab countries you have lived in or visited:

Country	Duration of Visit	Reasons for visit	MSA Courses completed	Colloquial Courses

3. If any, please indicate knowledge and levels of other languages (besides English and Arabic):

Language	Novice	Intermediate	Advanced	Native speaker



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OU Arabic Language Flagship Partner Program
RECOMMENDATION & WAIVER FORM

Name of Applicant: _____

Name of Referee: _____ Title: _____

To the Applicant:

Complete the top portion of this form and give this form to your referee.

Note: According to the *Privacy ACT of 1974*, you have the right to inspect and review confidential letters and statements of recommendation in your file. If you wish to waive the right to examine this reference, please sign the following statement:

I hereby waive the right to examine the evaluation and understand that its contents will not be shared with me.

Signature _____ Date _____

To the referee:

The OU Arabic Language Flagship Program is a rigorous five-year program in Arabic language and culture designed to help students develop superior language skills while pursuing an academic degree program of their choice. The program is for students who have the commitment, ambition and intellectual promise to work in a Middle East related profession. The selection process is competitive and selected students will be eligible for merit-based scholarships. Please comment specifically on the applicant's motivation, maturity, academic abilities, and professional goals as they relate to incorporating a rigorous study of the Arabic language with the applicant's major. Your impressions of the student's ability to adapt to a different cultural environment, his/her linguistic preparation, and any other factors which reflect the candidate's potential for success in learning a foreign language in an intensive setting locally and overseas would also be useful.

Language instructors: Please use the language evaluation form provided and include any comments about the applicant that would aid in the selection process.

Referee's Signature: _____ Date: _____

This form and the recommendation letter (or the language evaluation form for language instructors) must be received no later than November 15, 2008 for Spring semester 2009.

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OU Arabic Language Flagship Partner Program
LANGUAGE EVALUATION FORM
For Language Instructors

1. Please list the courses in which you have had the applicant and the grade you assigned for each

Name of Course	Grade Assigned

2. Please complete the chart below, indicating the applicant's ability in each category.

Skill	Poor	Fair	Good	Excellent
Reading				
Writing				
Listening				
Speaking				

3. Please indicate at which end of the scale your student falls in the following categories:

Categories	Low									High
	1	2	3	4	5	6	7	8	9	10
Attendance										
Classroom participation										
Homework Assignments										
Quality of Homework Assignments										
Motivation										
Dedication to learn Arabic beyond the classroom										

4. Please add any comments on the applicant's aptitude and potential for advancement in the language

5. Please indicate extent of endorsement of the applicant (please choose one):

Strongly recommend__ Recommend__ Recommend with reservation__ Do not recommend__