

Vesalius College

Language Study Form for 3-Year Program Students

Student Information Full student no. (optional).....
Family name L.....
First name

Language Information Language(s) of instruction at Secondary School / High School:
(Filled in by students) / /
..... / /
Language chosen for Vesalius: Dutch French
My mother/father tongue(s) is: / /
The language(s) of my mother is: / /
The language(s) of my father is: / /
At home we speak: / /
Student's signature Date:

Placement Test Date of Placement Test.....
(Filled in by examiner) Admitted to.....
Notes on Oral Test:
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Notes on Written Test:
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Name of Examiner (in capitals) Signature.....

Administration Input access by date.....
Language choice approved by date.....
Copy to student by date.....