

**THE DEPARTMENT OF LINGUISTICS APPLICATION SUPPLEMENT**  
**(Send to the Department of Linguistics!)**

**Name:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
\_\_\_\_\_  
**Phone:** \_\_\_\_\_ **email:** \_\_\_\_\_

**Language competence ability (Excellent/Good/Fair/Poor):**

	<b>Language Name</b>	<b>Reading</b>	<b>Writing</b>	<b>Speaking</b>
Native language(s)	1. _____			
	2. _____			
Other language(s)	1. _____			
	2. _____			
	3. _____			

**Preferred faculty advisor at the University of Connecticut:** \_\_\_\_\_

**Anticipated specialization (Circle one or more):**

Syntax    Semantics    Morphology    Historical linguistics  
Phonology    First language acquisition    Other (specify) \_\_\_\_\_

**Language specialization, if any (Circle one or more):**

American Sign Language    Germanic    Japanese  
Korean    Slavic    Romance    Other (specify) \_\_\_\_\_

**Other universities you have applied to (optional):** \_\_\_\_\_  
\_\_\_\_\_

**Names and affiliations of three (3) academic references:**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Outside financial support you have applied for and the status of the application:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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