

# DEPARTMENT OF FOREIGN LANGUAGES

## LANGUAGE BACKGROUND SURVEY

### ITALIAN

Name \_\_\_\_\_ QCC ID # \_\_\_\_\_ Major \_\_\_\_\_

Phone number \_\_\_\_\_

**DISCLAIMER:** Please provide accurate and truthful information to the questions below by circling the appropriate answer. Failure to provide accurate information may affect your class program and financial aid status, and delay your graduation date. All the information contained in this survey will be treated confidentially, and will be used for institutional purposes only.

1. Do you speak Italian (**NOT** Sicilian, Neapolitan or any other dialect) with your family/relatives?

Select      YES – Go to question 3  
One         NO – Go to question 2

2. Have you completed one or more years of Italian in high school?

Select      YES – Go to question 3  
One         NO – STOP (do not go any further)

3. Which of the following are you able to say and write in Italian? (**NOT** Sicilian, Neapolitan or any other dialect)

- A) State your name ..... YES
- B) Indicate your address and/or phone number..... YES
- C) Describe 4-5 activities you **usually do** during the day ..... YES
- D) Describe 4-5 activities you **did** this morning ..... YES
- E) Describe 4-5 activities you **did** in high school ..... YES

I hereby certify that the above answers are truthful and accurate. I am aware that if I register for a course that is different from the one I was placed into and advised to take, I will be moved to an appropriate level during the first weeks of class. It is the policy of the Foreign Languages Department that all students registering for a language course shall take a course at their appropriate language level. The Queensborough Community College administration has acknowledged that the instructor has the final say as to the course appropriate for my language level.

Signed \_\_\_\_\_ Date \_\_\_\_\_

-----STOP-----Do Not Fill Past This Point-----STOP-----

<i>Placement</i>	<i>Advisor's Initials</i>	<i>Date</i>

Revised 12/2021