



# UNIVERSITY OF THE NATIONS PHNOM PENH



## INFORMATION ON ENGLISH LANGUAGE ABILITY

All students who do not have English as their first language must complete this form and return it with the application to the Admissions Office in order for their application to be considered.

### Identity:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Init: \_\_\_\_\_

Street/Box: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Country: \_\_\_\_\_

### Experience in English:

1. How long have you studied English? \_\_\_\_\_ years, \_\_\_\_\_ months.

2. Have you ever had a native English speaker as a teacher? [ ]Yes [ ]No

If yes, when? \_\_\_\_\_

For what class? \_\_\_\_\_

For how long? \_\_\_\_\_

3. Have you ever studied in an English-speaking country? [ ]Yes [ ]No

If yes, where? \_\_\_\_\_

For how long? \_\_\_\_\_

4. Have you ever lived or worked in an English-speaking country? [ ]Yes [ ]No

If yes, where? \_\_\_\_\_

For how long? \_\_\_\_\_

5. Describe the help you would need to complete written and reading assignments and to understand lectures in an English-speaking classroom.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please mail all forms to:

DTS Phnom Penh  
U of N Cambodia  
PO. Box 1415  
Phnom Penh

Phone: 855-23-882-680  
Email: [dts@uofncambodia.org](mailto:dts@uofncambodia.org)  
Website: [www.uofncambodia.org](http://www.uofncambodia.org)

Cambodia