Korean Language Program
Student Language Background Survey (SLBS)
University of California, Irvine
Department of East Asian Languages and Literatures

Student I.D. #: _________________________

1. Name: (Eng.) ____________________________ (Korean, if any) ____________________________


3. Major: _______________________________________________________________________

1. Address: _______________________________________________________________________

2. Phone: (____)____________________      Email: ____________________________________

3. Born in the U.S.? ________      If no, age entering the US: __________________________

4. Reasons for taking Korean: (Check all that apply)
   Personal Interest _____      Related Field _____      Major _____      Minor _____
   Language Requirement _____      Up to what level _____      Others _____________________

1. How many years of Korean have you taken?

   Institutions to what level length of time
   Study Abroad _______________________________ _________ _________
   College ______________________________________ _________ _________
   Community College _______________________________ _________ _________
   High School ______________________________________ _________ _________
   Elementary School _______________________________ _________ _________
   Others (Churches, Tutoring, etc.) _________________ _________ _________

9. Residency in Korean

   Age Age # of years
   From: _____ To: _____ _________

10. Which category do you think you belong to? Mark one.

   _____ a. I have never been exposed to Korean Language.
   _____ b. I can understand some spoken Korean, but cannot speak Korean.
   _____ c. I can only carry on some basic conversation with Korean speakers.
   _____ d. I have no difficulty in understanding/speaking Korean.
   _____ e. None of the above / Additional information (Specify): _____________________________

11. I certify that the information given above is accurate to the best of my knowledge. I am aware that any deliberate misrepresentation of my language background will result in a void of credit for this course.

   Signature: ____________________________      Date: ____________________________