Second Step in Becoming an International ELI Student Again

Dear ELI Alumnus,

Congratulations on completing the academic qualifications step of the ELI application process.

There are two screening tests, a sign language interview, and a language self-assessment that you will need to complete. When you qualify for the screening step, there will be a Doodle poll sent to you via email that you can complete to indicate the dates that you are available. Please look for this email from the eli.office@gallaudet.edu account.

The ELI language self-assessment needs to be completed and mailed to the following address:

Gallaudet University
English Language Institute, HMB E253
800 Florida Avenue NE
Washington, DC 20002-3695 USA

If you have any questions about the ELI forms, please email us at eli.office@gallaudet.edu, call us at (202) 651-5721, or fax us at (202) 448-6954.

Regards,
Dr. Helen Thumann, Director
School of Language, Education, and Culture
1. Tasks of the Screening Process

First, you will need to indicate your availability for a range of dates for scheduling the screening tests and the sign language interview. You will need to dedicate at least two hours for a Zoom session for every date that you indicate you are available. Zoom is a video chat app with a capability to share a computer screen with the viewer(s).

Gallaudet University is in USA’s Eastern Standard Time (EST). Please keep in mind that when we have Daylight Savings (ET) during part of the spring, the entire summer, and part of the fall, we are an hour earlier than EST during these times. You can use a time zone converter website like https://www.worldtimebuddy.com/ to help you figure out the date and time differences between us and your location.

Second, you will need to complete the Doodle poll with your available dates for completing the screening tests and the sign language interview when you get the Doodle email from eli.office@gallaudet.edu;

The entire screening process is done via Zoom. During the Zoom session, please use a quiet, stable room where you can concentrate. Please use a computer, laptop or tablet, not a cell phone for Zoom. Please inform anyone in the room that they need to leave so that you can be alone for the session.

If you have already completed the screening tests and sign language interview, you do not need to complete another Doodle poll. You would simply wait to get an email.
2. Language Self-Assessment

Print ELI Alumnus Name: ______________________________________________________________

Directions: Please mark the box that best matches your skill. If you were born deaf, became deaf later in life, have some residual hearing, or use a hearing aid, a cochlear implant, or some other assistive hearing device, please mark the box that reflects your best skill over the total of your lifetime. Hearing people will need to complete this survey as well.

Today’s Date: ___/___/____
MM/DD/YYYY

Spoken/Written Language of your Country: Proficiency Level:

Listening
☐ None ☐ Basic ☐ Intermediate ☐ Advanced ☐ Fluent

Speaking
☐ None ☐ Basic ☐ Intermediate ☐ Advanced ☐ Fluent

Reading
☐ None ☐ Basic ☐ Intermediate ☐ Advanced ☐ Fluent

Writing
☐ None ☐ Basic ☐ Intermediate ☐ Advanced ☐ Fluent

Signed Language of your Country:

Understanding Signs
☐ None ☐ Basic ☐ Intermediate ☐ Advanced ☐ Fluent

Communicating with Signs
☐ None ☐ Basic ☐ Intermediate ☐ Advanced ☐ Fluent

Spoken/Written English:

Listening
☐ None ☐ Basic ☐ Intermediate ☐ Advanced ☐ Fluent

Speaking
☐ None ☐ Basic ☐ Intermediate ☐ Advanced ☐ Fluent

Reading
☐ None ☐ Basic ☐ Intermediate ☐ Advanced ☐ Fluent

Writing
☐ None ☐ Basic ☐ Intermediate ☐ Advanced ☐ Fluent
Print ELI Alumnus Name: ________________________________________________

American Sign Language:
Understanding Signs □ None □ Basic □ Intermediate □ Advanced □ Fluent
Communicating with Signs □ None □ Basic □ Intermediate □ Advanced □ Fluent

Directions: Please respond to the questions. If the question does not apply to you, please write N/A.

Language Use:
Spoken/Written Language of your Country: □ N/A □ Home □ School □ Work
Signed Language of your Country: □ N/A □ Home □ School □ Work
American Sign Language: □ N/A □ Home □ School □ Work
English: □ N/A □ Home □ School □ Work

Directions: Please respond to the questions. If the question does not apply to you, please write N/A.

Age of First Use:
Spoken/Written Language of your Country: How old were you when you first started using this language?
Signed Language of your Country: How old were you when you first started using this language?
English If you have learned some English already, how old were you when you first started?
American Sign Language If you have learned some American Sign Language already, how old were you when you first started?