

(Please place on official Brown department letterhead and/or Brown affiliated hospital letterhead and return to OISSS along with all supporting documentation for all new J-1 Exchange Visitor applications).

J-1 Exchange Visitor – English Proficiency Verification

I have interviewed _____ and can verify that s/he possesses sufficient
J-1 Exchange Visitor's Name

proficiency in the English language to do the following:

- Yes No Perform his/her daily J-1 activities or complete their academic programs;
 - Yes No Navigate daily life in the United States;
 - Yes No Read and comprehend program materials;
 - Yes No Understand fully his/her rights, responsibilities and protections;
- and,**
- Yes No Know how to get help if necessary.

Select your interview method:

- In person on _____
month/day/year
- Via videoconference (e.g. Face Time, Skype) on _____
month/day/year
- By telephone (only if videoconferencing is not possible) on _____
month/day/year

Name of evaluator:

Brown University department and/or affiliated hospital department:

Title:

E-mail address:

Signature:

Date: