

English Proficiency Evaluation for ACE Program

To the Student

Please follow the four steps below to submit this form:

Step 1: Fill in your information before giving this form to your teacher.

Step 2: Request your English teacher who has known you for **at least half a year** to fill it out.

Step 3: Confirm that the form has a handwritten signature or school's seal.

Step 4: Upload the form to the ACE online application system.

Family Name: _____ Given Name(s): _____

Nationality: _____ School: _____

To the Evaluator

• We would appreciate it if you could answer the following questions in as much detail as possible.

• Please complete this form in English.

	Excellent TOEFL iBT® Test \geq 100	Good 100 > TOEFL iBT® Test \geq 86	Average 86 > TOEFL iBT® Test \geq 75	Below Average 75 > TOEFL iBT® Test
Speaking				
Listening				
Writing				
Reading				

Please write your comments about the students' English abilities.

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I, _____, hereby confirm that the student above is capable of communicating fluently in English and participating in a fully English-basis academic program.

Please provide us with the following information, as we may contact you directly should we require additional information.

- ① Name of Evaluator _____
- ② Occupation _____
- ③ Name of Institution _____
- ④ Job Title _____
- ⑤ Time period that you have taught the applicant
_____ YYYY / MM ~ YYYY / MM _____
- ⑥ Email _____
- ⑦ Phone _____

Notes

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Signature of the evaluator or official school stamp: _____

Date: _____

**Please be sure to sign by hand. Digital signatures will not be accepted.*