

One Alpha Drive Elizabethtown, PA 17022 Phone: (717) 361-1000

## **Course Modifications for Non-Native English Speakers**

Language Modification - Student Request Form

Dear Student,

enter text.

We understand that being a non-native English speaker can present unique challenges in your academic pursuits. To ensure that you have the best possible learning experience, the College offers Language Modification services to courses that may include extended time to submit tests and assignments, access to supplementary materials such as translation services, or other modifications that can help you succeed in your courses.

Please complete the following form to request language modifications for your course(s) of need. Approval for language modifications will only be granted *per course and semester* and will not be granted for an entire course load for a semester or the academic year. The student is expected to apply for Language Modification for Courses services for each semester and each course. Students seeking language modifications would be encouraged to request a tutor for the course in which modifications are being provided.

Your information will be kept confidential and used solely to provide the appropriate support. Non-identifiable information may be used for reporting purposes in the progress and usefulness of this program.

## **Personal Information**

**Full Name:** Click or tap here to enter text. **Phone Number:** Click or tap here to enter text.

**Student ID:** Click or tap here to enter text. **Email Address:** Click or tap here to enter text.

**Education Year:** Choose an item. **Primary Language Spoken at Home:** Click or tap

here to enter text.

Program of Study/Major: Click or tap here to

Additional Languages (list all): Click or tap here to

enter text.

Highest level of formal English Language study within the U.S.: Choose an item.

Have you been involved in English as a Second Language (ESL/ELL) services before attending Etown?

Choose an item. Click or tap here to enter text.

If so, please list the duration of your ESL/ELL involvement & education level you received these services (eg: 1 year; 9<sup>th</sup> grade): Click or tap here to enter text.



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## **Language Modification - Course Information**

Requested Course for Language Modification (include class day & time): Click or tap here to enter text.

Name of Faculty/Professor for Requested Course: Click or tap here to enter text.

What is your *language* challenge in this course? Click or tap here to enter text.

What is the *academic* challenge in this course? Click or tap here to enter text.

As a non-native English speaker, how does your language comprehension affect you on the following? Please explain.

- In the classroom setting (listening, note-taking, writing, communication, responses, understanding lectures, etc.)? Click or tap here to enter text.
- On evaluations (paper exams, exams on Canvas, multiple choice questions, essay/short answer questions, research papers, oral reports, presentations, etc.)? Click or tap here to enter text.
- Out-of-class assignments (reading, writing, etc.)? Click or tap here to enter text.

## **Requested Language Modification for Courses**

Please check the modifications you are requesting:
$\hfill\square$ Extended time on tests and other timed assignments.
$\square$ Reasonable extra time to submit written or reading assignments. (time management resources)
$\hfill\square$ Use of Grammarly or some other form of language and grammar check for written assignments.
$\square$ Access to approved supplementary materials to provide context (e.g., lecture notes, slides).
$\Box$ Permission to use translation tools, dictionaries, or translated vocabulary word bank during exams.
$\square$ Access to additional language support resources (e.g., language workshops, tutoring)
$\Box$ An alternate room to complete a test (with a proctor, if necessary) and the ability to ask language and context comprehension questions.
☐ Other (please specify):
Reason for Request: Please provide a brief explanation of why you are requesting these modifications. Include

any specific challenges you face in your academic work due to language proficiency.

Click or tap here to enter text.



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Assessment Before Course Modification	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	
I feel confident I will do well in this course						
I can understand the texts & course materials						
I am able to comprehend the context of the subject and questions on exams/tests						
I can keep up with lectures during class						
I feel comfortable communicating my needs bmy professor						
I am confident in participating in class discussions, group activities, and presentations						
My writing skills are at a sufficient level for college academics						
I feel more comfortable utilizing the campus resources						
Declaration:  I, the undersigned, certify that the information provided above is accurate and complete to the best of my knowledge. I understand that any false information may result in a delay or denial of my request for language modifications.  Signature: Date:						

Elizabethtown College is committed to ensuring that all students have an equal opportunity to succeed in their academic pursuits. Thank you for taking the time to complete this form.

Submit this form to Maria Pety, International Student Programs Advisor at <a href="mailto:oiss@etown.edu">oiss@etown.edu</a> or return the completed form to office BSC 248. After submitting, this form, please schedule a meeting with Maria Petty using this link: <a href="mailto:Book time with Pety, Maria">Book time with Pety, Maria</a>