



**English Language Training Program  
for  
International Graduate Students**

**Last Name (Family Name):** \_\_\_\_\_

**First Name (Given Name):** \_\_\_\_\_

**Current Local Address:** \_\_\_\_\_

\_\_\_\_\_

**Native Language:** \_\_\_\_\_ **TOEFL Score:** \_\_\_\_\_ **TOEFL Date:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Please answer the following questions:**

**What degree(s) did you earn before coming to Tufts?** \_\_\_\_\_

**At what school(s) did you earn your previous degree(s)?** \_\_\_\_\_

**Is this your first year at Tufts? Yes No**

**If this is not your first year at Tufts, when did you begin studying at Tufts?** \_\_\_\_\_

**What is your academic department?** \_\_\_\_\_

**Who is your academic advisor?** \_\_\_\_\_

**Which degree are you pursuing at Tufts?** \_\_\_\_\_ **Completion date?** \_\_\_\_\_

**What are the top three goals you wish to achieve by participating in the English Language Training Program this semester?**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**Thank you!**

**Tufts University  
English Language Programs  
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<http://ase.tufts.edu/ESL>**