

## To apply for The University of Mississippi Language Initiative you must:

- Complete The University of Mississippi Application for Undergraduate Admission and submit directly to: The University of Mississippi Office of Admissions, PO Box 1848, University, MS 38677. Be sure to include any application fees and additional materials requested by the Office of Admissions for enrollment at UM (currently enrolled students may skip this step).
- Collect the following information:
  - Completed UM Language Initiative Application
  - Copies of your transcripts and ACT and/or SAT scores (originals should be submitted to the Office of Admissions)
  - Letters of recommendation (forms provided with application)
    - **Incoming undergraduates** should submit three recommendations (one from your guidance counselor or principal and two from teachers) sealed in separate envelopes and signed across the flap by the person making the recommendation.
    - **Current undergraduates** should submit two recommendations (from professors with whom you have studied on the UM campus) sealed in separate envelopes and signed across the flap by the person making the recommendation.
  - A 500-750 word essay, double-spaced, explaining your motivation for applying to the UM Language Initiative and why you are a good candidate.
- Submit all materials (besides Application for Undergraduate Admission) to the Study Abroad Office, The University of Mississippi, PO Box 187, University, MS 38677.
- Deadline for submission is March 1. All materials must be postmarked by this date in order for your application to be considered by the selection committee for this year's UM Language Initiative.
- Students will be notified by the selection committee by the end of March as to their acceptance in the UM Language Initiative.
- Selected students must notify the Study Abroad Office of their intention to participate in the program no later than April 15. Any slots remaining open after April 15 may be offered to students who were not selected during the first application round.

### ***Be sure to mail all required documentation (except Application for Undergraduate Admission) to:***

UM Language Initiative  
Study Abroad Office  
P.O. Box 187  
University, MS 38677

### ***For further information:***

Phone: (662) 915-1508  
Fax: (662) 915-6798  
E-mail: [abroad@olemiss.edu](mailto:abroad@olemiss.edu)  
Web: [www.olemiss.edu/abroad](http://www.olemiss.edu/abroad)



*The University of Mississippi*

**Application for Admission to The University of Mississippi**  
**LANGUAGE INITIATIVE**

Please select your preferred language of study:  German  Russian  Japanese

I am:  an incoming undergraduate student at The University of Mississippi

a currently enrolled undergraduate student at The University of Mississippi

\_\_\_\_\_  
Name (last, first, middle)

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Home Address (street, city, state, ZIP)

\_\_\_\_\_  
Telephone (area code and number)

\_\_\_\_\_  
E-mail

What is your current or intended area of academic interest or major? \_\_\_\_\_  
\_\_\_\_\_

Highest ACT Composite Score: \_\_\_\_\_ Highest SAT Score: \_\_\_\_\_

Grade Point Average \_\_\_\_\_ (for incoming students: Weighted \_\_\_\_\_ Unweighted \_\_\_\_\_)

**Previous Language Experience**

List all languages you have studied and how many years of experience you have in each. \_\_\_\_\_  
\_\_\_\_\_

**To be completed by incoming undergraduates only:**

\_\_\_\_\_  
High School (name, street, city, state, ZIP)

\_\_\_\_\_  
Rank in class

**Language Initiative Terms and Conditions**

- Students accepted to the UM Language Initiative must declare and complete a minor in their selected language in order to be eligible for scholarship funds.
- Scholarship funds will cover the following expenses during the listed terms:
  - **Summer I** - Cost of tuition will be covered by the UM Language Initiative scholarship. Students are responsible for any costs related to their housing and meals during the program.
  - **Fall I** - Student is responsible for all costs related to study on campus at Ole Miss.
  - **Spring I** - Student is responsible for all costs related to study on campus at Ole Miss.
  - **Summer II** - Cost of tuition, housing, some meals, insurance, and program-sponsored excursions will be covered by the UM Language Initiative scholarship for a Study Abroad experience in their selected language. Students are responsible for any costs related to their transportation to and from the Study Abroad site, as well as personal expenses and passport and visa fees.
  - **Academic Year II** - Student is responsible for all costs related to study on campus at Ole Miss.
  - **Second Study Abroad experience** - UM Language Initiative students will be given special consideration for financial aid to be used toward a semester exchange program sponsored by The University of Mississippi.
- Students who do not respond to Study Abroad Office requests during the application process by stated deadlines may be declared ineligible for the UM Language Initiative.

*My signature below acknowledges that I have read the Terms and Conditions of the UM Language Initiative and agree to abide by them should I be selected to participate in the program.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# UM LANGUAGE INITIATIVE

## The University of Mississippi (incoming undergraduates only)

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Applicant's Name

Social Security Number

**Language:**  Russian  German  Japanese

You should give this form to your **high school COUNSELOR** or **PRINCIPAL**.

### TO THE COUNSELOR OR PRINCIPAL:

This student is applying for admission to the UM Language Initiative at The University of Mississippi. This is a rigorous academic program designed to challenge bright and ambitious students who wish to achieve a high level of proficiency in a foreign language while pursuing their chosen field of study. Entrance is competitive. Because the high school must send an official transcript and ACT and/or SAT scores directly to The University of Mississippi Office of Admissions, please assist us by providing a duplicate transcript to the student to send with the UM Language Initiative application. If standardized test scores (ACT and/or SAT) and class rank do not appear on the transcript, we ask you to include them. Also provide a list of courses and course results for the student's senior year if they do not appear on the transcript. Any additional information or insights that you may wish to provide the selection committee would be appreciated. Thank you for your help.

**Recommendation:** Your candid estimate of this applicant's academic performance, intellectual promise, work ethic, and qualities as a person will help the selection committee in making scholarship decisions. Please address your remarks specifically to this individual's suitability for participation in a selective academic program in intensive language training and indicate whether—and if so, why—he or she should be considered for the UM Language Initiative. **Please sign and date your letter of recommendation as well as this form.** The recommendation and form should be sealed inside a plain envelope, signed across the sealed flap, and returned to the student. Thank you for your help.

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Counselor's or Principal's Name (type or print)

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Counselor's or Principal's Signature

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Date

### TO THE APPLICANT:

Under the provisions of the Family Education Rights and Privacy Act of 1974, you will have the right, once enrolled in The University of Mississippi, to review your educational records. The Act also provides that you may waive your right to see the recommendations for admission. Your signature below indicates your intention to waive your right of access to this form.

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Applicant's Signature

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Date

**All application materials must be postmarked by March 1 for the applicant to be considered by the UM Language Initiative selection committee.**



*The University of Mississippi*

# UM LANGUAGE INITIATIVE

## The University of Mississippi

Applicant's Name \_\_\_\_\_

Social Security Number \_\_\_\_\_

**Language:**  Russian  German  Japanese

Incoming undergraduates should give this form to a **HIGH SCHOOL TEACHER**. Current undergraduates should give this form to a **PROFESSOR** they have had on the UM campus.

**TO THE WRITER OF THE RECOMMENDATION:**

This student is applying for admission to the UM Language Initiative at The University of Mississippi. This is a rigorous academic program designed to challenge bright and ambitious students who wish to achieve a high level of proficiency in a foreign language while pursuing their chosen field of study. Entrance is competitive.

**General Ratings:** In making the following ratings, please compare this student with his or her peers at your institution. Please check the most appropriate box.

Average or Below	Good/Above Average	Excellent (top 10% this year)	Outstanding (among best this year)	One of top few in my experience		Don't Know
					Academic motivation	
					Academic creativity	
					Academic self-discipline	
					Academic growth potential	
					Leadership	
					Initiative	
					Sense of humor	
					Emotional maturity	
					Responsibility	
					Reaction to setbacks	

**Recommendation:** Your candid estimate of this applicant's academic performance, intellectual promise, work ethic, and qualities as a person will help the selection committee in making scholarship decisions. Please address your remarks specifically to the applicant's suitability for participation in a selective academic program in intensive language and indicate whether—and if so, why—he or she should be considered for the UM Language Initiative. **Please sign your letter of recommendation as well as this form.** The recommendation and form should be sealed in a plain envelope, signed across the sealed flap, and returned to the student. Thank you for your help.

\_\_\_\_\_  
Teacher's Name (type or print)

\_\_\_\_\_  
Teacher's Signature

\_\_\_\_\_  
Date

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\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

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*The University of Mississippi*

# UM LANGUAGE INITIATIVE

## The University of Mississippi

Applicant's Name \_\_\_\_\_

Social Security Number \_\_\_\_\_

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\_\_\_\_\_  
Teacher's Name (type or print)

\_\_\_\_\_  
Teacher's Signature

\_\_\_\_\_  
Date

**TO THE APPLICANT:**

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Applicant's Signature

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Date

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*The University of Mississippi*