

# University of Toronto Department of French/Études françaises, St. George Campus

http://www.french.utoronto.ca/
TORONTO UNIVERSITIES' FRENCH CONTEST/LE CONCOURS DES UNIVERSITÉS TORONTOISES 2010

## STUDENT APPLICATION FORM - EXTENDED/IMMERSION FRENCH

N.B. BOTH STUDENT AND TEACHER MUST READ THE REGULATIONS <u>BEFORE</u> COMPLETING AND SIGNING THIS FORM. PLEASE SEND THE COMPLETED FORM ALONG WITH A CHEQUE FOR \$40 PAYABLE TO: UofT French Contest, TO THE ADDRESS INDICATED ON THE LAST PAGE OF THIS FORM BEFORE <u>February 8<sup>th</sup></u>, 2010.

## **STUDENT INFORMATION**

Student's LAST name (PRINT)	Student's FIRST name (PRINT)		
Home address (number, street, apt.)	(city, province, postal code)		
Home telephone number	Name of school currently attending		
Date of birth ( year-month-day)	Country of birth		
Residency(Canadian citizen/landed immigrant)	Male or female		
STUDENT BACKGROUND			
Your background in French	MUST BE outlined. Please be specific.		
How many years have you studied French, including this year?			
In what grade did you begin studying French?			
Please include all schools (elementary and secondary).			
Name of School/Board	Grades and Dates		
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Time spent in French-speaking milieu (up to one year before grade nine, describe, giving locations, dates, etc			
Summer courses, camps, exchang locations, dates, etc.	<b>ges</b> (up to three months while	e attending secondary school;	explain giving
Other experiences in French (Ple	ase describe in detail.)		
French in the home (Indicate how	much time you hear or spea	ak French in the home.)	
(circle one) All the time	Some of the time	Never	
If you do, please explain more fully	y.		
Native French speaker Indicate if	any member of your family	y is a native French speaker.	
(circle one) Yes	No		
Travel (indicate if you have travell where, when, and for how long.)	ed extensively in any Frencl	h-speaking provinces or count	ries; please specify:
Previous participation Have you	participated in a York Unive	rsity or University of Toronto	French Contest
before? If yes, please give details.			

# **STUDENT VERIFICATION**

## Please return completed form to your teacher.

I have read the enclosed regulations and I attest that I am eligible to participate in TORONTO UNIVERSITIES' FRENCH CONTEST/LE CONCOURS DES UNIVERSITÉS TORONTOISES 2010.

Student's signature	Date		
TEACHER VERIFICATION			
Name of French teacher (PLEASE PRINT)	Home telephone No./ E-mail		
Name of School	Name of Board		
Complete School Address	School Fax No.		
The information regarding the above-ment	tioned student is accurate to the best of my		
knowledge and has been verified by me. I	have read the enclosed regulations and I am		
satisfied that the above-named student is e	ligible to participate.		
Enclosed is our cheque in the amount of	\$40 payable to: UofT French Contest to cover this		
stude	ent's entry fee.		
Teacher's signature	Date		

APPLICATIONS MUST BE RECEIVED NO LATER THAN FEBRUARY 15, 2010. PLEASE MAIL OR HAND DELIVER APPLICATIONS TO:

TORONTO UNIVERSITIES' FRENCH CONTEST LE CONCOURS DES UNIVERSITÉS TORONTOISES 2010

> C/O Dr. Marie-Anne Visoi Department of French/Études françaises 50 St. Joseph Street, 2<sup>nd</sup> Floor Toronto, Ontario M5S 1J4