

**Language Requirement Form (Form Lambda)**

Student Name: \_\_\_\_\_

Advisor signature and date: \_\_\_\_\_

Ph.D. Language Requirement: The language requirement for students in Mathematics is reading ability of one foreign language, selected from French, German, or Russian. Competence may be demonstrated in one of the following three ways:

A. Passing an exam in the language administered by the Foreign Language Committee of the Mathematics Department.

B. Completion of at least one advanced course (at the level of French 202, German 202, or Russian 202 or beyond) in the language with a grade of B or above. (See the section "Language Research Tool Requirement" in the Graduate Studies Bulletin.)

C. Passing the Educational Testing Service exam as administered at the University of Nebraska or as administered at another university (with a grade of 500 or more).

The Language Requirement can be waived upon the recommendation of the Supervisory Committee, with the approval of the Graduate Chair. The recommendation from the Supervisory Committee must include justification for the request, typically in the form of a recommended substitute, e.g., a graduate-level course in another department on a topic that is directly related to the student's research area. Each semester, the Graduate Chair will report any waivers granted to the Graduate Faculty. The Language Requirement must be completed (or waived) at least seven months before the date of the Final Oral Exam.

The above-named student has satisfied the language requirement as follows (check one and provide requested information):

\_\_\_ Option A.

Language chosen: \_\_\_\_\_

Date of exam: \_\_\_\_\_

Examiner: \_\_\_\_\_

(attach notification of pass/fail to this form)

\_\_\_ Option B.

Course number: \_\_\_\_\_

Term taken: \_\_\_\_\_

Grade: \_\_\_\_\_

\_\_\_ Option C.

Language chosen: \_\_\_\_\_

Date of exam: \_\_\_\_\_

Score on exam: \_\_\_\_\_

(attach notification of score to this form)

If a waiver is requested, the advisor should complete the remainder of this form.

Reason for waiver request:

A vote of the supervisory committee on the waiver request was taken on \_\_\_\_\_ with \_\_\_\_\_ voting in favor, \_\_\_\_\_ voting opposed and \_\_\_\_\_ abstaining.

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\_\_\_\_\_ Waiver approved.

\_\_\_\_\_ Waiver denied.

Signature of Graduate Chair \_\_\_\_\_ Date \_\_\_\_\_