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Why do you want to be a language partner?

Please provide two references below:

Personal: Name: _____ Mailing address: _____
Telephone: _____
Relationship: _____ Email: _____
Business¹: Name: _____ Mailing address: _____
Telephone: _____
Relationship: _____ Email: _____

Indicate your availability (days and times) for meetings with your language partner on a weekly basis:

Signature _____ Date _____

Please return this form to:
Ying Hu
Department of Asian Languages and Literatures
Office: Room 301, 479 Main Street, Burlington, VT 05405
Email: Ying.Hu@uvm.edu
Tel: (802) 656-1012

Thank you!

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