LANGUAGE PARTNER PROGRAM GUIDELINE

Language Partner Program

- The Language Partner Program is designed for students who are interested in language exchange, other cultures, making new friends.
- International Programs will help match you with a best language partner that fits your profile. Students help each other to improve their target language.

Expectations

- Respect each other’s culture, religion, gender
- Respect each other’s time. If you cannot meet with your partner at the set time, please notify them at least one day in advance. If you cannot notify your partners in advance, call them as soon as possible to explain what happened and let them know if you will be at the next planned meeting. Arrange an alternate time if desired.
- Use email or phone to contact partners and notify each other of any change.
- Learn how to pronounce each person’s name. Repeat it until you get it right.
- Find a convenient time and a place to meet with your partner. Agree on a schedule for regular meetings. (Recommended 1-2 hours per week)
- Attend a Language Partner Program Orientation at the beginning of the quarter. Or if you miss this group meeting you will be expected to come to the IP office to review these guidelines before you receive a language partner.

Tips for a great conversation

- Listen with respect. Suspend judgment as best as possible
- Invite and honor diversity of opinion. Seek to understand rather than persuade
- Speak what you really feel
LANGUAGE PARTNER PROGRAM APPLICATION

SECTION 1 (PLEASE PRINT)

NAME: ________________________________________________
BIRTHDATE: ____________________ STUDENT ID________________________
EMAIL ADDRESS (REQUIRED)_______________________________________
PHONE NUMBER: ________________________________________________
CURRENT ADDRESS: ________________________________________________
_________________________________________________________________
GENDER: _ F _ M

SECTION 2

NATIONALITY:______________________________________
YOUR NATIVE LANGUAGE(S)_____________________________________
CURRENT CLASS LEVEL: _ FRESHMAN
_ SOPHOMORE
_ Intensive English Program (ESL)

MAJOR: ________________________________________________

YOUR CHOICE OF LANGUAGE OR CULTURE YOU ARE INTERESTED IN
1ST CHOICE ______________________ 2ND CHOICE ______________________
HOW LONG HAVE BEEN AT SSCC? ________________________________
HOW LONG DO YOU PLAN TO STUDY AT SSCC? ____________________
HOBBIES, INTEREST: ____________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________

For more information or other issues, contact us at grenouard@sccd.ctc.edu, or stop by the International Programs office.

Date received:

Matched with: Date: 