

English-Language Ability Certificate

Submission of this "English-Language Ability Certificate" as the "Document concerning English-language ability" mentioned in the Application Guide is permitted only if the applicant cannot upload any of the documents but can have his / her English-language ability certified by a public agency (e.g., an embassy, etc.), university, or high school.

If the above applies to you, get this English-Language Ability Certificate completed and upload it to certify your English-language ability.

[For the applicant]

Applicant's name	Family name:	First name:
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[For the evaluator]

- Please write in English only.
- If the applicant has completed an ordinary education curriculum in English in one of the following countries during the past six years, please indicate this fact in the comments box below.
[Australia, Canada, Ireland, New Zealand, Singapore, United Kingdom, United States of America]
- Please keep the original of this English-Language Ability Certificate for your records and give the "Copy" to the applicant.
(NOTE: Toyo University may contact you with inquiries concerning the information provided on this form or to ask you to submit the original.)

(1) Please mark a check (☒) in the appropriate box for each item below.

	Excellent	Good	Average	Poor
Speaking				
Listening				
Writing				
Reading				

- When basing evaluation on TOEFL iBT® scores, "excellent" should refer to a section score of between 24 and 30, "good" to a score of between 16 and 23, "average" to a score of between 8 and 15, and "poor" to a score of 7 or below.

(2) Please comment on details concerning the applicant's English-language ability, his or her learning progress, items worthy of special mention, instruction you have personally provided to the applicant, or other relevant matters here.

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Name of evaluator: _____

Evaluator's city and country of residence: _____

Evaluator's institution/organization: _____

Position and department in institution/organization: _____

Evaluator's E-mail (PC) address: _____

Evaluator's telephone No.: _____

Place official stamp here. If no stamp is available, form must be printed on letterhead.

Evaluator's signature: _____	Date (day, month, year): _____
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