



**Foreign Language Across the Curriculum  
Applicant Form**

**Name:** \_\_\_\_\_ **UFID:** \_\_\_\_\_

**Department:** \_\_\_\_\_ **College:** \_\_\_\_\_

**UF Status** (please check ONE):                      **FACULTY**                      **GRADUATE STUDENT**

**Telephone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Name of proposed FLAC course:** \_\_\_\_\_

**Will the FLAC course accompany an existing area studies course?**      **YES**                      **NO**

**If yes, what is the area studies course?** \_\_\_\_\_

**What European language will be used in your FLAC course?** \_\_\_\_\_

**Have you ever taught a FLAC course?**                      **YES**                      **NO**

**Have you received any CES funding in the past?**                      **YES**                      **NO**

**If yes, list the name(s) of the grant(s) and/or support and date(s) received:**

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**Provide a brief description of the proposed FLAC course (attach additional sheet if necessary):**

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