

## **Video Assessment for ASL104**

Video Assessment Feedback Name: Email address:

Name of School- if applicable:

Phone number with area code:

## **Instructions:**

- 1. Make sure that you have adequate "signing space". (Top of the head to your waist)
- 2. Answer each question by first indicating the question you are answering. For example: "question #1...NAME-ME...J-O-H-N...S-M-I-T-H"
- 3. .... Indicates a slight pause
- Complete video must be no less than three minutes and no more than five minutes. Assessor will comment on the first five minutes only if time is exceeded.
- 5. Comments will be sent to the email address (or addresses) indicated in the above profile submitted.

## ASL104

- 1. \*What is your name?
- 2. Tell a 5-minute story about yourself (include your name fingerspelled), your family or friends, your interests and activities. (4-5 minutes total)

\*Required first.
Answer within 4 - 5 minutes.