**[Form 5]**

**Letter of Recommendation**

|  |  |  |
| --- | --- | --- |
| Applicant | Name |  |
| Country |  |
| Course |  |
| Field | School + Department |
| Current(Last) School |  |
| Recommender | Name |  |
| Title or Position |  |
| Institutions |  |
| E-mail |  |
| Address |  |
| Telephone |  |
| How long have you known the applicant? |  |

■ Please assess the applicant’s qualities in the evaluation table given below.(check O)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Excellent | Good | Average | Below Average | |
| Academic Achievement |  |  |  |  | |
| Future Academic Potential |  |  |  |  | |
| Integrity |  |  |  |  | |
| Responsibility/Independence |  |  |  |  | |
| Creativity/Originality |  |  |  |  | |
| Communication Skills |  |  |  |  | |
| Interpersonal skills |  |  |  |  | |
| Leadership |  |  |  |  | |
| Please provide us with comments on the applicant’s performance record, potential, or personal qualities which you believe would be helpful in considering the applicant’s application for the proposed degree program. | | | | |

|  |  |  |
| --- | --- | --- |
| YYYY.MM.DD |  |  |
| **Date** | **Name of the Recommender** | **Signature of Recommender** |