



1. THIS PART IS TO BE COMPLETED BY THE APPLICANT

Name / Last name:
Applied Programme:
Adress:
Date of Birth:
The recommender's Name / Last Name:
Title or position:

2. THIS PART TO BE COMPLETED BY THE RECOMMENDER.

Please rank the student as well as you can by the following criteria. Then, e-mail your letter to the address above as soon as possible. Thank you very much for your assistance.

How long have you known this applicant, and in what capacity?						
The evaluation of the applicant compared to people /students you know.						
	Top %5 Remarkable	Top %10 Excellent	Top %25 Good	Top %50 Average	Below %50 Poor	Insufficient Information
Depth of knowledge in the proposed area						
Motivation						
Determination to pursue the degree sought						
Ability to work independently						
Verbal communication skills						
Writing ability						
Ability to work with others						
Overall						

3. Please supply any additional information about the applicant in the space provided below or in a separate letter.

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Signature	Date	Institution	Tel
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