Due December 1	2, 2025					
Applicant's nam	ne:					
How long and	l under what c	ircumstances h	ave you knowr	n the applicant	?	
2. Please rate the applicant according to the categories listed below.						
	Excellent Top 5%	Very Good Top 15%	Good Top 25%	Fair Top 50%	Weak Lower 50%	Not known
ntellectual otential						
nalytical bility						
Creativity						
/lotivation						
ndependence						
Maturity						
Cooperation vith others						
English skill written]						
English skill Oral]						
<u> </u>	le additional c	omments on the	annlicant			
ive your opinion o	n the applicant's բ	ootential for success	s in the course and			
aaariba tha annlia	ant's academic str	ength and any wea	knesses. Please a	dd pages if necess	sary.	

## 4. Indicate your overall evaluation on the applicant. [Please choose one of below.] Strongly Recommended Recommended with reservation Not recommended Name: Date: affiliation/position: Institution / Address: E-mail: Phone: