



Type or Print Clearly

1-TO BE FILLED by the APPLICANT

Name	Surname _____	Name _____
Address	_____	
	City _____	Country _____
Applicant's Birth Date	: ____ / ____ / ____ day month year	
Name of Recommender	Surname _____	Name _____
	occupation _____	address _____
	city _____	country _____

2- TO BE FILLED by the RECOMMENDER

Please provide the information requested below and return this reference letter as soon as possible to the applicant with your signature. We appreciate your cooperation in evaluation of the candidate.

How long and in what capacity have you known applicant?/

How does the applicant compare to others whom you have known so far in similar category

	Top 5% Outstanding	Top 10% Excellent	Top 25% Above Average	Top 50% Fair / Average	Bottom 50% Below Average	Not Observed
Knowledge in discipline						
Motivation						
Ability to work independently						
Speaking Skills						
Writing Skills						
Willingness to cooperate						
Overall						

Please use back of this form or attach separate letter if you would like to make additional comments on the applicant

Signature: _____ **Date:** ____ / ____ / ____
Day Month Year

Name : _____ **Position :** _____

University: _____ **Phone:** (____) _____
area code