

## **LETTER OF RECOMMENDATION (FORM 2)**

## To the applicant:

Please fill in the required information below in capital letters, then forward this form to the person who will write this letter.

Legal Name:							
Last/Family		First		Middle			
Email:			Date of Birth:				
			YYYY	ММ	DD		
Intended Degree:	Master	Doctoral	N	Ion-Degree			
Intended Program:	Korean Studies	Gl	obal Studies				
<b>To the recommen</b> Please fill in the ques		the best of your l	knowledge.				
Recommender Name:			Position:				
Email:			Phone Number:				
How long have you	known the applicant,	and in what conte	ext?				
I certify that the information presented in my recommendation is accurate, complete, and honestly presented. I also certify that I have kept any information in my recommendation confidential and I will not disclose it under any circumstances.							
Signature:	Pri	inted Name:			Date:		



1. Please assess the applicant's qualities in the evaluation table given below. Rate the applicant compared to other students in the applicant's school year.

	Classification	Excellent (Top 2%)	Very Good (Top 10%)	Good (Top 25%)	Average	Below Average	Poor	N/A
	Academic Achievement							
	Academic Potential							
	Integrity							
	Responsibility and Independence							
	Creativity and Originality							
	Communication Skills							
	Interpersonal Skills							
	Leadership							
th	rough grades and other o	bjective indi	cators.					
Γ								



3.	educational background that the evaluators should consider? Please explain with specific examples.
4.	How well do you think this candidate is prepared for graduate study?
4.	Tiow well do you think this candidate is prepared for graduate study:
5.	Please write anything else that you feel we should know about the applicant. (Optional)

Please seal this letter in an envelope and sign across the flap, then return it to the applicant. We appreciate your assistance in this matter.