

Applicant's Name: _____

RECOMMENDATION FORM (Confidential)

Please specify

- International Development Program (IDP)**
- Public Management and Policy Analysis Program (PMPP)**

Admissions
Graduate School of International Relations
International University of Japan (IUJ)
777 Kokusai-cho, Minami Uonuma-shi, Niigata 949-7277 JAPAN
TEL: (025) 779 - 1200 / FAX: (025) 779 - 1188

TO THE APPLICANT:

This form should be given to individuals who you think are appropriate for discussing your qualifications for graduate study. Please have each recommender return this form to you in a sealed envelope after they have completed it. The returned envelope is to be mailed to IUJ with the rest of your application materials. This recommendation is used for admissions purposes only, and you will not have access to it whether or not you are admitted.

Please note that it is the applicant's responsibility to request the form early enough to meet the designated application deadline.

Please type or print your name: _____
Last (Family) First Middle

Current Address: _____

TO THE RECOMMENDER:

The person named above is an applicant to the Graduate School of International Relations, IUJ. The Admissions Committee attaches considerable weight to the statements made by the recommenders that the applicant has selected. You will greatly assist the members of the Committee and the applicant by providing candid responses to the items on this form. It is equally acceptable to respond to these questions in letter form, but should you choose this format, please fill out the information in the box and staple the letter to the back of this form. It is recommended that you keep a copy for your files in case the original should be lost in the mail. The Committee is aware of the time necessary to prepare such an assessment and gratefully acknowledges your help.

Please return this form to the applicant in a sealed envelope on which you have signed across the seal.

Name of Recommender: _____
(Please print or type)

Position/Title: _____ School/Firm: _____

Address: _____

1. How long have you known the applicant and in what context? Please comment on the frequency of your interaction.

2. What are the applicant's principal strengths?

3. In what areas can the applicant improve?

4. In your opinion, has the applicant given careful consideration to his/her plans for entry into the MA program?

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5. Please compare the applicant on the scale below with others you have known during your professional career.

	Truly Exceptional	Outstanding	Excellent	Above Average	Average	Below Average	Unable to Judge
	top 5%		top 10%	top 25%	top 50%	bottom 50%	
Intellectual ability							
Analytical ability							
Leadership skills							
Ability to work with others							
Creativity							
Persistence and drive							
OVERALL RATING OF CANDIDATE							

Indicate the peer reference group to which the applicant is compared: _____

6. Please comment on the ratings above and feel free to make additional comments concerning the applicant's integrity, achievement, managerial potential and other personal qualities. Please attach an additional sheet if necessary.

May we call you if the Admissions Committee feels that it would be helpful to speak with you by telephone regarding the applicant? Yes No

If yes, please provide us with your office and/or home telephone number.

Office: _____ Home: _____

Recommender's Signature: _____ Date: _____