

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

Current Address: _____

Address: _____

- This form consists of two pages: Page 1 of 2*

Applicant's Name: _____

RECOMMENDATION FORM (Confidential)☐ IDP ☐ PMPP

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: _____