

RECOMMENDATION FOR ADMISSION

* Please type or print clearly in Korean or English.

TO BE COMPLETED BY THE APPLICANT	
Applicant's Name : _____	
Last	First
Nationality : _____ Date of Birth (DD/MM/YY) : _____	
Applying for admission to study in the department : _____	
Program : <input type="checkbox"/> Bachelor <input type="checkbox"/> Master's <input type="checkbox"/> Doctor's <input type="checkbox"/> Master's & Doctoral Combined	
_____	_____
Applicant's Signature	Date(DD/MM/YY)

TO BE COMPLETED BY THE RECOMMENDER					
Recommender Name : _____					
Title / Position : _____	Organization / Institution : _____				
Address : _____					
City	State				
Telephone Number : _____	Zip				
E-mail : _____					
Country					
<p>* Please rate the applicant by checking the appropriate box. Relative to other students you have known, how do you rate this applicant in terms of :</p>					
	Excellent	Good	Above Average	Average	Below Average
Academic Achievement					
Analytical Ability					
Academic Motivation					
Research Aptitude					
Intellectual Ability					
Leadership Potential					
Written English					
Oral English					
Interpersonal Skills					
Imagination & Creativity					
Self-Confidence					

1. How long have you known the applicant and under what circumstances?

2. What do you consider the applicant's most outstanding talents or characteristics?

3. What are the applicant's chief liabilities or weaknesses?

4. The admissions committee would appreciate any additional statement you may wish to make concerning the applicant's aptitude for advanced study or his/her potential for becoming a successful manager and leader, if appropriate.

Recommender's Signature

Date(DD/MM/YY)

✘ Letter of recommendation must be sealed with recommender's signature on envelope.