

Kansai University Graduate School Graduate School of Societal Safety Sciences 2025 Admission

Last

Examination Number *

Letter of Recommendation

Applicant's Name:

First

Middle (if any)

THIS PART TO BE COMPLETED BY THE RECOMMENDER

To the Recommender: The person named above is applying for admission to the Graduate School at Kansai University. We would appreciate your candid assessment of the applicant's intellectual ability, professional skills, and research potential. Please also comment on the applicant's personality, strengths and weaknesses, compatibility with coworkers and so on. If applicable, please include any known obstacles the applicant must overcome to attain her or his educational goals (e.g., financial, social, cultural, educational, or other disadvantages).

*Please enclose this form in an envelope, seal it, sign it across the seal, and return it to the applicant. If there is insufficient space, please attach a separate sheet.

Please CHECK the appropriate evaluation:

| | Extraordinary | Outstanding | Above Average | Average | Below Average | Cannot Judge |
|--|---------------|-------------|------------------|---------|------------------|--------------|
| Academic Performance | | | | | | |
| Intellectual Potential | | | | | | |
| Motivations for Graduate Study | | | | | | |
| Recommender's Name (in capital letters): | | | | | | |
| Address: | | | | | | |
| Telephone Number: | | | | | | |
| Signature: | | | | Date: | | |