Graduate School of Sogang University (Dasan Hall #425),

Application Number

35 Baekbeom-ro (Sinsu-dong), Mapo-Gu,

Seoul 04107, Korea

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E-mail: gradsch@sogang.ac.kr

**Recommendation for Admission [Form 4]**

**To the applicant**: Please fill in your name and the other required information below. In turn, deliver or email this form to the person who will write this letter. **NOTE:** Request your recommender to seal his or her letter of recommendation in an official envelope and sign across the back flap upon completion. Recommendation letters that are not sealed and signed will not be accepted.  **Confidential**

**Please type or print clearly in English or Korean.**

**To be completed by the applicant**

Applicant’s Name : Last(family) First(given) Middle(if any)

Nationality : Date of Birth (yyyy/mm/dd) : / /

Desired program of study

(1) Department : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(2) Specific Major : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(3) Desired Degree : □ Master's □ Doctoral □ Integrated Master’s and Doctoral

Applicant Signature Date of Application (yyyy/mm/dd) : / /

**To be completed by the recommender**

Recommender’s Name :

Title / Position : Organization / Institution :

Address :

Telephone Number : E-mail :

\* Please rate the applicant by checking the appropriate box.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Excellent** | **Good** | **Fair** | **Poor** |
| **Academic Achievement** |  |  |  |  |
| **Analytical Motivation** |  |  |  |  |
| **Research Aptitude** |  |  |  |  |
| **Intellectual Ability** |  |  |  |  |
| **Leadership Potential** |  |  |  |  |

1. **Academic / intellectual evaluation**: Please comment on the nature and quality of the applicant's academic performance and potential. We are especially interested in your evaluation of the applicant's academic achievement, motivation, originality of thought, creativity, intellectual depth or breath, and academic promise.

2. **Personal / interpersonal evaluation**: What are your impressions of the applicant as a person? How is he or she viewed by professors (teachers)? How does the applicant interact with others? What are the applicant’s major strengths and weaknesses?

3. **Additional comments**: Is there anything else we should know about this applicant? Please feel free to attach additional sheets if necessary.

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**Recommender’s Signature Date (DD/MM/YY)**

***\*After completing the recommendation letter, please printout the letter you wrote and sign it respectively. Please enclose it in an official envelope and sign across the back flap; the recommendation letter that is not signed will not be considered valid.*** Please return this form sealed in an envelope to the applicant. Thank you!