



RECOMMENDATION FORM FOR STUDENT EXCHANGE PROGRAM

PART A. TO BE COMPLETED BY APPLICANT	
Applicant's Full Name:	
Mailing Address:	
Home Institution:	Home Country:
PART B. TO BE COMPLETED BY PROFESSOR OR ACADEMIC ADVISOR	
<p>The above student is applying for Exchange Program. We value your comments and request that you give a candid report so that fair consideration may be given to the applicant. You may attach a separate letter of recommendation, if necessary.</p>	
1. How well do you know the applicant?	
<input type="checkbox"/> By name/sight <input type="checkbox"/> Casually <input type="checkbox"/> Very well-numerous personal contacts	
2. What is your opinion regarding the student's aptitude for academic study?	
<input type="checkbox"/> Highly enthusiastic <input type="checkbox"/> Strong <input type="checkbox"/> Moderate <input type="checkbox"/> Hesitant <input type="checkbox"/> Negative <input type="checkbox"/> No opinion	
3. What is your opinion of the student's adaptability to a new environment?	
<input type="checkbox"/> Highly enthusiastic <input type="checkbox"/> Strong <input type="checkbox"/> Moderate <input type="checkbox"/> Hesitant <input type="checkbox"/> Negative <input type="checkbox"/> No opinion	
4. What is your opinion of the student's ethical standard and character?	
<input type="checkbox"/> Highly enthusiastic <input type="checkbox"/> Strong <input type="checkbox"/> Moderate <input type="checkbox"/> Hesitant <input type="checkbox"/> Negative <input type="checkbox"/> No opinion	
5. What is your opinion of the student's social readiness?	
<input type="checkbox"/> Highly enthusiastic <input type="checkbox"/> Strong <input type="checkbox"/> Moderate <input type="checkbox"/> Hesitant <input type="checkbox"/> Negative <input type="checkbox"/> No opinion	
6. Do you think the student is qualified to participate in the student abroad program? If yes/no, please explain:	
7. Please explain how the overseas exchange program will benefit the student in his/her major field of study.	
8. Are there special factors that should be considered in reviewing the student's application? If yes, please explain:	
9. Overall Recommendation	
<input type="checkbox"/> Highly enthusiastic <input type="checkbox"/> Strong <input type="checkbox"/> Moderate <input type="checkbox"/> Hesitant <input type="checkbox"/> Negative <input type="checkbox"/> No opinion	
Recommender's Name:	Institution:
Position and Department:	
Recommender's Signature:	Date:

Thank you for taking the time to complete this form. Your observations will assist us in our evaluation of the applicant.

For inquiries, please contact us at: