Form 8

Kansai University Graduate School Graduate School of Societal Safety Sciences 2023 Admission

| - | *Administrative use |
|-------------|---------------------|
| Examination | |
| Number * | |
| | |

Letter of Recommendation

| Applicant's Name: | | | | | | | | | | | | |
|---|---|--|--|---------------------------------------|--|--|--|--|--|--|--|--|
| | Last | First | Middle (if any) | | | | | | | | | |
| THIS PART TO BE COMPLETED BY THE RECOMMENDER | | | | | | | | | | | | |
| We would appreciate potential. Please also and so on. If applicabl goals (e.g., financial, s *Please enclose this | your candid assessme comment on the appli le, please include any k social, cultural, educati | ent of the applicant's cant's personality, stanown obstacles the a conal, or other disadvaseal it, sign it acros | admission to the Graduate School at Kansai Us intellectual ability, professional skills, and rengths and weaknesses, compatibility with applicant must overcome to attain her or his eduntages). | d research coworkers ducational | | | | | | | | |
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| Please CHECK the appropri | iate evaluation: | | | | | |
|--|------------------|-------------|------------------|---------|------------------|--------------|
| | Extraordinary | Outstanding | Above Average | Average | Below Average | Cannot Judge |
| Academic Performance | | | | | | |
| Intellectual Potential | | | | | | |
| Motivations for Graduate Study | | | | | | |
| Recommender's Name (in cap Position or Title: | nool or Compan | | | | | |
| Address: | | | | | | |
| Telephone Number: | : | | | | | |
| Signature: | | | | Date: | | |