

SEOUL NATIONAL UNIVERSITY RECOMMENDATION FOR ADMISSION

Note to Applicant: Please fill out the items No. 1 ~ No. 4 below. Deliver or mail this to the person who will write this recommendation. Ask your recommender to seal this in an official envelope and sign across the back after it has been written. Recommendation that are not sealed and signed will not be accepted.

Confidential

1. Name of Applicant: _____

Last Name

First Name

Middle Name (if any)

2. Country of Citizenship: _____

3. Proposed Department: _____

4. Name of Applicant's attending University: _____

Note to Recommender: We would appreciate your frank and candid appraisal of the candidate as a potential student at Seoul National University.

5. How long have you known the applicant and in what capacity? _____

6. What do you consider to be the applicant's strengths? _____

7. What do you consider to be the applicant's weaknesses? _____

8. How well do you think the applicant has thought out plans for study at Seoul National University? _____

9. Do you know of any medical or emotional condition which might affect the applicant's performance at the University? If so, please explain. _____

10. Please give us your appraisal of the applicant in terms of the qualities listed below. Rate the applicant in comparison with others applying for the proposed program whom you have known.

	Unusually Outstanding (Top 2%)	Superior (Top 5%)	Excellent (Top 15%)	Good (Top Third)	Average (Middle Third)	Poor (Bottom Third)	No Information
Intellectual Ability							
Ability to Work With others							
Ability in Oral Expression							
Ability in Written Expression							
Imagination And Probable Creativity							

11. Please comment on the ratings that you have assigned in #8 and make any additional statement about the applicant's record, potential, or personal qualities which you believe would be helpful in considering the applicant's application for the proposed degree program.

Recommender's Signature _____

Recommender's Name (Please print clearly) _____ Date _____

Position or Title: _____

School or Firm: _____

Address: _____

Number Street City State Zip
Code

Country

Please return this form by the application deadline sealed in an official envelope and signed across the back to: Office of International Affairs, Seoul National University, San 56-1 Shillim-dong, Kwanak-gu, Seoul 151-742, Korea. Your recommendation is considered as an important part of the applicant's application. We will take no action on the applicant's application until we have heard from you. Thank you again for your assistance.