

## **Letter of Recommendation**

Applicant's full name:					
To the recommender: Thank you for agreeing to provide this letter to the applicant in a sealed envelope with yo Admissions Division, Discovery F 2-1-1 Tsushima-naka, Kita-ku, Ok	ur signature ac Program for Glo	<i>ross the back se</i> bal Learners, O	al, OR mail dire	ectly to:	! return the form
Recommender's name and job title:					
School, company, or professional affiliation:	·				
Address:					
Phone number:	E-m	nail:			
Relationship to applicant:	How long have you known the applicant?				
PART I:					
	4 (superior)	3 (good)	2 (sufficient)	(needs work)	unable to judge
self discipline, planning, and time management skills	(Superior)	(5004)	(Sufficient)	(needs work)	juage
ability to adapt to new situations and environments					
ability to cooperate and work with others					
creativity/problem-solving skills					
leadership skills					
communication skills (written and spoken)					
PART II: Do you feel this applicant has the highlight or clarify the applicant's strengths					comments to
Recommender's signature:			Date:		

<sup>\*</sup> The Letter of Recommendation must be in English or Japanese.