

**Letter of Recommendation 2**

(To be completed by a university instructor, employer or non-relative who knows you on a professional/academic level)

Applicant's Name in English

Family Name: \_\_\_\_\_ Given Name(s): \_\_\_\_\_

**For the Recommender**

Thank you for your cooperation in providing a recommendation for the above applicant to the Ritsumeikan Asia Pacific University Graduate School. Please answer the following questions in as much detail as possible. Please print clearly if writing by hand.

If there is insufficient space below, please attach a separate sheet.

You may either return this document to the applicant in a sealed envelope or mail it to us.

*By post: Graduate School Admissions Office, Ritsumeikan Asia Pacific University*

*1-1 Jumonjibaru, Beppu, Oita, 874-8577 Japan*

*By email: grad-rec@apu.ac.jp*

What is your relationship to the applicant and how long have you been acquainted?

---

---

---

---

---

---

---

---

Please describe the applicant's character strengths and also the areas in which they need to improve.

---

---

---

---

---

---

---

---

How do you think the applicant will benefit from studying at APU?

---

---

---

---

---

---

---

---

Please describe an area that you think the applicant should improve upon academically or professionally while at APU.

---

---

---

---

---

---

---

---

### Letter of Recommendation 2 (continued)

Please provide an evaluation of the applicant in terms of the qualities below:

	Exceptional	Excellent	Above Average	Average	Below Average	Unable to Assess
Intellectual Ability						
Analytical Ability						
Judgment						
Maturity						
Motivation						
Flexibility						
Ability to Work With Others						
Oral Communication						
Written Communication						
Future Potential						

Other Comments:

---



---



---



---



---



---



---



---



---



---

Please fill in the following information as we may contact you if there are any unclear statements.

Name of Recommender: \_\_\_\_\_

Occupation: \_\_\_\_\_

Name of Institution: \_\_\_\_\_

Job Title: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

_____ Signature	_____ Date (yy/mm/dd)
--------------------	--------------------------