



Seoul National University Recommendation (Undergraduate)

REGISTRATION NUMBER					
9					

* Please fill in registration number in this area.

- Please type in English or Korean.

TO BE COMPLETED BY THE APPLICANT

- Complete this section and give this form with a stamped and addressed envelope to a recommender who knows you well.

Applicant's Name: _____

Current Attending/Previously Attended School: _____

Date of Birth (DD/MM/YY): _____ E-mail: _____

Desired College: _____

Desired Admissions Unit: _____

1. I request that this recommendation be treated confidentially by the officers and faculty members of SNU.	<input type="checkbox"/> Agree	Date
2. I waive my right of access to this recommendation.	<input type="checkbox"/> Agree	
3. I take full responsibility for any false information in the submitted materials.	<input type="checkbox"/> Agree	
4. I hereby affirm that all the information contained here is true and complete.	<input type="checkbox"/> Agree	DD/MM/YY

TO BE COMPLETED BY THE RECOMMENDER

- We appreciate your candid evaluation of the named applicant and his or her capacity for success as a student in the proposed field of study. Your recommendation plays an important role in the admissions process. We will not evaluate a candidate's application until your recommendation is received.

Name: _____ E-mail: _____

Title, Position and Institution: _____

Telephone: _____

How long have you known the applicant and in what context? _____

- Please rate the applicant by checking the appropriate box. Relative to other students you have known, how do you rate this applicant in terms of:

	Below average	Average	Good	Excellent	Highly Distinct	N/A
Academic achievement						
Academic motivation						
Leadership						
Cooperativeness						
Creativity/Originality						

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1. **Academic / intellectual evaluation:** Please comment on the applicant's academic performance and capacity. We appreciate your evaluation of the academic achievement, motivation, originality and intellectual prospects of the applicant.

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2. **Personal / interpersonal evaluation:** From the perspective of a teacher/professor, please comment on the personal aspects of the applicant other than his/her academic capabilities. This section may include characteristics such as the applicant's weaknesses/strengths and interpersonal skills.

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3. **Additional comments:** Please provide us with additional comments which cannot be addressed in the sections above. You may attach additional sheets, if necessary.

Recommender's Signature

Date (DD/MM/YY)