修士課程　様式－⑨

（日本語）

推薦状

志願者氏名: _____

姓　　名

1.　推薦者と志願者の関係及びその関係の発生した時期

2.　志願者の本学志望の目的、及びその動機の確かさ、持続性、学習遂行に必要な能力について

その他

推薦者氏名:_____

姓　　*名*

所属:_____役職_____

住所:_____

電話番号:_____

Email:_____

志願者が本推薦状の閲覧を希望した場合さしつかえないでしょうか。:　　Yes_____

No_____

Date(yyyy/mm/dd)_____

署名:　_____印

記入後、厳封の上、志願者にお渡し下さい。

(English)

Recommendation Letter Form

Applicant's Name:_____
(Last) (First) (Middle)

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

2. Please assess the suitability of this candidate's application to Waseda University. Elaborate on the applicant's characteristics such as motivation, diligence, and capabilities.

We appreciate additional information that will help us better understand the applicant including suitability for a rigorous university education.

Recommender's Name:_____
(Last) *(First)* *(Middle)*

Name of Institution:_____

Title:_____

Address:_____

Telephone:_____E-mail:_____

Do you want the applicant to have access to this recommendation letter: Yes_____
No_____

Date(yyyy/mm/dd)_____

Signature:_____ Seal

TO RECOMMENDER: Please place this form in a sealed envelope with your signature over the seal and return it to the applicant. Thank you.