

Letter of Recommendation

Details of referee

Title: First name: Surname:

Email address:

Current position:

Institution name:

Signature: Date:

Details of student (applicant)

First name: Surname:

Recommendation

In what capacity have you known the student?

How long have you known the student?

Please compare the applicant with students in the same field and with similar experience	Truly exceptional (Top 5%)	Outstanding (Top 10%)	Above Average (Top 25%)	Average (Middle)	Below Average (Lower 50%)	Inadequate Opportunity to Observe
Overall academic performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to analyze a problem logically and formulate a solution	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to follow through, complete projects, and meet deadlines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work with others and within groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Feel free to add a letter of recommendation with further details to this form on a separate sheet.

Please submit this form and letter of recommendation by **Wednesday, 31st January 2024** at

mcqst-summer@lmu-misu.de.