

Recommendation Form

KDI School of Public Policy and Management

263 Namsejong-ro, Sejong-si, 30149, Republic of Korea

Phone: 82-44-550-1281/1220

Website: <http://kdischool.ac.kr/>

■ To the Applicant:

Name of Applicant (Last, First, Middle):

Applying Program: MPP MDP MPM PP DP

Nationality:

■ To the Recommender:

Thank you for agreeing to write an evaluation on behalf of the individual named above. We value your honest and considerate evaluation of the applicant. After completing the form, please return it in a sealed envelope to the applicant so he/she can submit it along with his/her application documents in one package via postal mail.

*Please type or print legibly.

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

2. What do you consider to be the applicant's strengths or talents?

3. What do you consider to be the applicant's weaknesses or developmental needs?

4. How would you rate the applicant relative to others in your organization (school)?

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Please give us your appraisal of the applicant in terms of the qualities listed below. Rate the applicant in comparison with others applying for graduate school whom you have known, or with top performing men and women in his or her professional peer group.

	Truly Exceptional	Excellent	Very Good	Good	Below Average	No Information
	Top 2%	Top 10%	Top 25%	Middle 50%	Lower 25%	
Leadership Potential						
Interpersonal Skills						
Analytical Ability						
Oral Communication Skills						
Written Communication Skills						
Imagination & Creativity						
Motivation						
Independence						
Flexibility						

Are you confident of the applicant's integrity?

- Yes
 Unable to judge
 No

In summary, I (Please check one.)

- strongly recommend
 recommend
 recommend with some reservations
 do not recommend this applicant for the program at the KDI School.

Please complete the following information and write your preferred address for receiving correspondence from the KDI School.

Recommender Information	
1. Name:	2. Organization:
3. Position or Title:	4. Address:
*Please check if you are the applicant's immediate superior <input type="checkbox"/>	

5. Phone Number (country code & phone number):

6. E-mail Address:

I hereby submit a recommendation letter to the KDI School.

Signature

Year / Month / Day