**RECOMMENDATION FORM**

Please write below the applicant’s full name

|  |  |  |
| --- | --- | --- |
| Name | Last Name |  |

Thank you for assisting the committee in the evaluation of the student named above. The applicant will be a candidate to study psychology abroad for one semester through the Student Mobility Exchange Program.

In order to evaluate the student adequately and to ensure the confidentiality of the information you provide, please complete this form and return it to the applicant in a **sealed envelope**. Feel free to enclose additional comments on the applicant along with this form.

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

|  |  |  |
| --- | --- | --- |
| Has the student worked directly with you? | **YES** | **NO** |
| Please describe the activities in which the applicant has participated.  Describe the student’s overall performance. | | |
|  | | |

2.

3. Please rate the applicant in the qualities listed below.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **1** | **2** | **3** | **4** | **5** |
| Intelligence |  |  |  |  |  |
| Communication skills |  |  |  |  |  |
| Creativity |  |  |  |  |  |
| Team work |  |  |  |  |  |
| Leadership |  |  |  |  |  |
| Dedication |  |  |  |  |  |
| Responsability |  |  |  |  |  |
| Motivation |  |  |  |  |  |
| Iniciative |  |  |  |  |  |

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| --- |
| 1= very poor; 2 = poor; 3= fair; 4= good; 5= very good |

Please discuss the student’s positive and negative characteristics. Include those characteristics that you consider relevant for an objective assessment of the applicant’s aptitudes and potential to study abroad for one semester.

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| (Attach extra sheet, if necessary) |

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| Recommender’s Name: |  | Signature: |
| Institution: |  | |
| Position/Title: |  | |
| Contact Information: | Phone number:  E-mail: | |
| Date and place: |  | |