**SOPHIA UNIVERSITY**Recommendation Letter Form

**Non-degree Program**

上智大学ノンディグリー入学志願者推薦状

This form may be filled out either in English or in Japanese. /英語または日本語で記入してください。

Applicant’s Name:

志願者氏名　　　　　 (LAST) (FIRST) (MIDDLE)

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

 推薦者と志願者の関係及びその関係の発生した時期

2. How would you assess his/her purpose in coming to Sophia? Please consider motivation, perseverance and academic abilities.

 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

3. Please include any other information or remarks which, in your estimation, are relevant in deciding the applicant’s acceptance or rejection.

 その他

Your Name:

推薦者氏名　　　(LAST) (FIRST) (MIDDLE)

 姓　　　　　　　　　　　名

Your Institution/所属: Your Position/職業(役職):

Address/住所: 　Tel/電話:

May the applicant have access to this recommendation letter?

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/はい or No/いいえ

Date/日付: Signature/署名: 印

TO THE RECOMMENDER: After completing this form, please enclose it in an envelope, seal it, and sign your name across the seal. Then return it directly to the applicant, who will send it to Sophia along with all his/her other application documents./ 記入後、厳封の上志願者にお渡しください。