# The University of Osaka Graduate School of Science

### **Evaluation Letter**



Deadline: Wednesday 11 June, 2025 at 15:00 JST

## **International Physics Course**

Pages 1 and 2 of this recommendation form should be completed by the supervisor or an instructor qualified to evaluate the applicant's physics education and sent directly to the IPC Office, the

University of Osaka, by e-m	nail by the ap	plication de	eadline.			·
Email address: ipc-office@ipc.ph	ys.sci.osaka-u.a	<u>ac.jp</u> (Internatio	onal Physics	Course Office).		
Name of Applicant:					_	
The person named above is app	lying for admis	ssion to the G	raduate Scho	ol of Science at	the University of	Osaka.
We would appreciate your opinic Course (IPC), the University of Cachievement in the field of physicoutine praise. Comments about experience upon which your or academic program, or other personal course.	Osaka. The IPC ics. Explicit des character, inte pinion is based	C is particularl scriptions of a egrity or motiva d. Rankings s	y interested in academic stre ation are also should be rela	n an evaluation on an evaluation on and weak appreciated, if p	of the applicant's nesses are more pertinent. Please	potential for helpful than describe the
	Outstanding (Top 5%)	Excellent (Top10%)	Good (Top Third)	Fair (Middle Third)	Poor (Bottom Third)	Unable to judge
Intellectual ability						
Imagination and creativity						
Ability in oral expression						
Writing ability						
Quality of previous work						
Research aptitude						
Promise						
<ul> <li>How long have you k</li> <li>How often do you see</li> <li>In what capacity?</li> </ul>	e the applicant	? 🗆	Daily □ W	/eekly ☐ Mo	onthly □ Rar	ely

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#### **Evaluation Letter**

Graduate School of Science

Deadline: Wednesday 11 June, 2025 at 15:00 JST

### International Physics Course

Please indicate your impressions of the applicant regarding intellectual ability, diligence, motivation, aptitude for research work, and character, as well as the reasons why the applicant is recommended for the IPC.

Name of evaluator	Position	
(Please print)	or title	
Name of institution	Dhone	
or business	Phone	
Address	Email	

Evaluator's signature:	Date:	