 **Osaka University Evaluation Letter**

Graduate School of Science

**Deadline: Wednesday 12 June, 2024 at 15:00 JST**

International Physics Course

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**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, Osaka University, by e-mail by the application deadline.**

**Email address:** ipc-office@ipc.phys.sci.osaka-u.ac.jp (International Physics Course Office).

Name of Applicant:

The person named above is applying for admission to the Graduate School of Science at Osaka University.

We would appreciate your opinion of the applicant named above for graduate admission to the International Physics Course (IPC), Osaka University. The IPC is particularly interested in an evaluation of the applicant’s potential for achievement in the field of physics. Explicit descriptions of academic strengths and weaknesses are more helpful than routine praise. Comments about character, integrity or motivation are also appreciated, if pertinent. Please describe the experience upon which your opinion is based. Rankings should be related to other students in the same class or academic program, or other persons of comparable experience.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | 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 |  |  |  |  |  |  |

* How long have you known the applicant? years months
* How often do you see the applicant? □ Daily □ Weekly 　□ Monthly 　□ Rarely
* In what capacity?

(Continued to the next page)

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

Evaluator’s signature: Date: