



**The University of Osaka**  
Graduate School of Science  
Special Integrated Science Course

## Evaluation Letter

for enrollment  
in April or October 2026

**Deadline: Friday 14 November, 2025**

**Pages 1 and 2 of this letter should be completed by the supervisor or an instructor of the applicant qualified to evaluate the applicant's academic achievement and sent directly to the University of Osaka by e-mail by the application deadline.**

**Email address:** gssadmis@sci.osaka-u.ac.jp (The Office of Graduate Admissions – Special Integrated Science Course).

Name of Applicant: \_\_\_\_\_

We would appreciate your opinion of the applicant named above for graduate admission to the Special Integrated Science Course (SISC), the University of Osaka. The SISC is particularly interested in an evaluation of the applicant's potential for achievement in the field of chemistry, biological science, and macromolecular science. 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? \_\_\_\_\_

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《SISC》

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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 SISC.

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

Evaluator's signature: \_\_\_\_\_ Date: \_\_\_\_\_