Form 8

Kansai University Graduate School Graduate School of Societal Safety Sciences 2026 Admission

	*Administrative use
Examination	
Number *	

## Letter of Recommendation

Applicant's Name:				
	Last	First	Middle (if any)	
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We would appreciate potential. Please also and so on. If applicate goals (e.g., financial, *Please enclose this	er: The person named e your candid assessm o comment on the appl ole, please include any social, cultural, educat	above is applying for nent of the applicant licant's personality, s known obstacles the tional, or other disady, seal it, sign it acro	admission to the Graduate School at Ka 's intellectual ability, professional skill trengths and weaknesses, compatibility applicant must overcome to attain her or antages).  ss the seal, and return it to the applic	s, and research with coworkers his educational

Please CHECK the appropri	iate evaluation:	:				
	Extraordinary	Outstanding	Above Average	Average	Below Average	Cannot Judge
Academic Performance						
Intellectual Potential						
Motivations for Graduate Study						
Recommender's Name (in cap  Position or Title:	nool or Compan					
Address:						
Telephone Number:			Email	:		
Signature:				Date:		