Appendix 1

Recommendation Form

Letter of Recommendation

- 1. Please fill this form and make a handwritten signature at the bottom of the last page.
 - * You can extend the size of answer boxes for the question # 1~5, 7
 - * A referee can download this LOR form of Word file at the Google Survey Form.
- 2. Then, please scan the signed document and make the file name as "GIST application number_Student's name_Nationality _Referee's name".
- 3. Finally, please upload it to the Google Survey Form we provided on the instruction email.

[Note] You can upload only one recommendation letter on the Google Survey Form. So, if you are going to upload a recommendation letter for more than two applicants, please use a different email address for each applicant when you take the Google Survey.

Nationality: Desired Program(\forall): M.S. Ph.D. M.S./F Date of Birth: Intended Department: How long have you known the applicant and in what context? What do you consider to be the applicant's strengths? What do you consider to be the applicant's weaknesses? How well do you think the applicant has thought out plans for graduate study?	· Student Name: · GIST Application Number (9*****):					
Date of Birth: . How long have you known the applicant and in what context? 2. What do you consider to be the applicant's strengths? 3. What do you consider to be the applicant's weaknesses? 4. How well do you think the applicant has thought out plans for graduate study?	Nationality:					
3. What do you consider to be the applicant's weaknesses? 4. How well do you think the applicant has thought out plans for graduate study?	· Date of Birth:					
3. What do you consider to be the applicant's weaknesses? 4. How well do you think the applicant has thought out plans for graduate study?	1. How long have you known the	e applicant and in what context?				
3. What do you consider to be the applicant's weaknesses? 4. How well do you think the applicant has thought out plans for graduate study?						
4. How well do you think the applicant has thought out plans for graduate study?	2. What do you consider to be t	he applicant's strengths?				
4. How well do you think the applicant has thought out plans for graduate study?						
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4. How well do you think the applicant has thought out plans for graduate study?	3. What do you consider to be t	he applicant's weaknesses?				
4. How well do you think the applicant has thought out plans for graduate study?						
	4. How well do you think the ap	plicant has thought out plans for graduate study?				
5. DO VOU KNOW OF ANY MEDICAL OF DSYCHOLOGICAL CONDITION WHICH MIGHT Affect the Applicant's performance	5. Do you know of any medical o	or psychological condition which might affect the applicant's performance?				
5. 20 you miles of any medical of poyenotes, ear condition miles might direct the applicants performance	20 you mon or any medical c	psychological condition much might affect the applicance performance.				

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6. Please give us your appraisal of the applicant in terms of the qualities listed below. Please rate the applicant in comparison to other students known to you on the following dimensions. Tick (\checkmark) the appropriate box.

	Unusually outstanding (Top 5%)	Superior (Top 10%)	Excellent (Top 15%)	Good (Top 3rd)	Average (Middle 3rd)	Poor (Bottom 3rd)
Academic Achievements						
Intellectual Skills						
Research and Creative Abilities						
Interests and Motivations						
Relevant Work Experience						
Ability to Work with Others						
Potential for Success in Graduate School						

Potential for Success in Graduate School					
7. Please comment on the ratings that you have assigned in #6 and make any additional statement about the applicant's record, potential, or personal qualities.					
I hereby duly recommend myself, and I am aware t admission process within	hat my opinions	• • •		•	•

Name:	
manne.	

- · University / Institute:
- · Position / Title:
- · Phone number(with a national code):
- · E-mail Address:
- · Signature:
- ex) YYYY. MM. DD.