

ASIAN CENTER
University of the Philippines
Diliman, Quezon City 1101
Metro Manila, Philippines

**RECOMMENDATION FOR ADMISSION
TO THE MASTERAL PROGRAM
_____ Semester, AY _____ - _____**

To the Applicant: Please complete section 1 of this form and give this to your major professor, former program adviser and current employer/supervisor. This form should be accomplished and placed in a sealed envelope by the recommender. Attached the sealed recommendation to your application and other documents and send to the Office of the College Secretary, ASIAN CENTER, University of the Philippines, Diliman, Quezon City.

Section 1

1. Name of Applicant: _____
- | | Family Name | First Name | Middle Name |
|--|-------------|------------|-------------|
|--|-------------|------------|-------------|
2. Degree sought: MA Asian Studies (thesis) MA Philippine Studies (thesis)
 M Asian Studies (non-thesis) M Philippine Studies (non-thesis)
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To the Recommender: The person whose name appears above has applied for admission to the ASIAN CENTER, UP Diliman. Your evaluation of his/her qualification will be of great help in our assessment of his/her application. Your recommendation will be considered strictly confidential.

Section 2

1. How long have you known the applicant and in what capacity?

- As his/her professor _____ years
- As his/her research adviser _____ years
- As his/her employer/supervisor _____ years
- Others (please specify) _____ years

2. In your opinion, do you think the applicant is ready to face the demands of his/her studies at the Graduate Program? Yes _____ No _____ Please explain your answer.

3. What do you think are the skills/abilities/capabilities/strengths of the applicant that could contribute to the completion of his/her studies?

4. What do you think are the applicant's weaknesses that could affect his/her studies?

5. Please rate the applicant based on the following scale.

Characteristics	Excellent	Very Good	Good	Average	Poor	No Basis for Judgment
Intellectual capacity						
Emotional stability						
Diligence and resourcefulness						
Responsibility and initiative						
Honesty and integrity						
Originality/ingenuity						
Potential for success in selected field of study						
Social interaction skills						
Leadership and administrative ability						
Written expression skills						
Oral expression skills						

6. Please indicate additional information/remarks concerning the applicant's potential as a graduate student. *(Please use additional sheet, if necessary.)*

7. Please indicate your overall endorsement or assessment of the applicant's potential for graduate study.

- Excellent Average
 Very Good Poor/Unsatisfactory
 Good Others _____

Signature: _____ Date: _____
Printed Name: _____
Position/Title: _____
Mailing Address: _____
Telephone Number: _____

IMPORTANT: PLEASE PLACE THIS ACCOMPLISHED FORM IN A SEALED ENVELOPE AND SIGN ACCROSS THE FLAP BEFORE RETURNING TO THE APPLICANT.

Additional Sheet

If necessary, please use this space to expound on your responses

Lined writing area for responses.