

University of the Philippines OPEN UNIVERSITY Los Baños, Laguna 4031 Philippines

RECOMMENDATION FOR ADMISSION (Postbaccalaureate Program)

To the Applicant: Please complete Section 1 of this form and give this to your former major professor, former program adviser and employer/supervisor. This recommendation form should be accomplished and placed in a sealed envelope by the recommender. Attach the sealed recommendation to your application and other documents and send to the *Office of Registrar*, *UP Open University*, *Los Baños*, *Laguna*.

Family Name	First Name	Middle Name			
	4. Minor field:				
ation of his/her qual	ification will be of great h	nelp in our assessment of			
the applicant and in	what capacity?				
sor		years			
lviser		years			
supervisor		years			
pecify)		years			
licant is prepared for	graduate work? Why?				
nt's potential to pursu	e graduate work and resear	rch.			
	person whose name a ation of his/her qual mmendation will be of the applicant and in va- sor dviser supervisor pecify)				

4. Please rate the applicant based on the following scale

Characteristics	Excellent	Very Good	Good	Average	Poor	No basis for judgment	
Intellectual capacity							
Potential for success in major field							
Emotional stability							
Diligence and resourcefulness							
Responsibility and initiative							
Honesty and integrity							
Originality/Ingenuity							
Leadership and administrative ability							
Analytical and interactive ability							
Written expression skills							
Oral expression skills							
Please indicate additional in tudent. (<i>Please use additional</i>). Please indicate your overall tudy	sheet if ned	cessary)	nent of the	applicant's po			
[] 1.0 Outstanding							
[] 1.5 Above average			[] 4.0 Unsatisfactory				
[] 2.0 Satisfactory[] 2.5 Satisfactory with	some reserv	ations		Unqualified ners			
ignature: rinted Name: osition/Title:			_ Date:				