



Nagoya University

Confidential Academic Reference for 2024 Undergraduate Admissions

1. For the Applicant

Important Note for Applicant:

Please fill all the items below and pass one form to each of your referees. Please make sure both of your referees will submit this form and a letter of recommendation by the respective deadline. It is the applicant's responsibility to check if the reference forms and letters are delivered to our office by the deadline.

Full Name: _____ / _____ / _____
 (English) *Family Name First Name Middle Name*

Gender: Male Female Date of Birth: _____ / _____ / _____
dd mm yyyy

School Currently Attending: _____

2. For the Referee

Important Note for Referee:

This form is to be mailed directly to us and received by the respective deadlines: Admissions Office, International Programs, Nagoya University, Furo-cho Chikusa-ku, Nagoya, 464-8601 Japan. You may also return the sealed envelope to the applicant and the applicant can send the envelope on behalf of you.

Referee's Name: _____ / _____ / _____
 (English) *Family Name First Name Middle Name*

Name of Institution: _____

Title: _____ Subject(s) Taught: _____

Address: _____

_____ / _____ / _____
City/State Country/Region ZIP Code

Phone: _____ / _____ / _____
home mobile Fax

Email Address: _____
Please make sure that your email address is entered correctly as this will be our primary way to contact you



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Personal and General Abilities

1. On a separate sheet, please elaborate on the above character traits such as Leadership, Creativity, and Motivation, with specific examples where possible. We appreciate additional information that will help us better understand the distinguishing characteristics of the applicant from a holistic standpoint. Feel free to include a general profile of the applicant, including strengths and weaknesses, and his/her aptitude and suitability for a rigorous university education.

2. Course(s) you have taught (or will teach) the applicant particularly in Grade 10 through 12:

Course 1		(Grade)
Course 2		(Grade)
Course 3		(Grade)
Course 4		(Grade)
Course 5		(Grade)

3. If applicable, please indicate the academic class rank of the applicant:

Top 5%
 Top 10%
 Top 25%
 Middle 50%
 Lower 25%

Personal and General Abilities (Continued)

4. From your knowledge of the applicant, please rate on the following by checking off a list on the scale of:

0 (not applicable), 1 (below average), 2 (average), 3 (good), and 4 (excellent)

	0	1	2	3	4
Leadership					
Ability to work with others					
Maturity					
Motivation					
Conduct/Ethics					
Curiosity					
Creativity/Innovative thinking					
Inquiry and analysis					
Sense of responsibility					
Perseverance					
Communication skills					
Globally minded					
Overall Evaluation					

I certify that all information submitted on this evaluation form is, to the best of my ability, factually true and honestly presented and was completed by the intended teacher whose name is on this form.

Signature: _____

Date: _____ / _____ / _____

dd
mm
yyyy