

Recommendation Letter

Please fill out and sign this recommendation letter, and send it to the email: selecaoppgmufpr@gmail.com

I - Applicant

Full name:
Intended course: () Master () Doctorate

II - Referee

A. Personal Data

Full Name:
Institutional e-mail:
Position:
Institution/Organization:

Highest academic degree:
Institution where it was obtained:
Area:
Year:

B. How long have you known the applicant? In which conditions?

C. We ask you to evaluate rigorously the applicant with respect to the following items.

	Poor	Regular	Good	Excellent	Exceptional
Academic performance					
Motivation, enthusiam					
Written expression					
Oral expression					

D. Please give us your opinion on the candidate's ability, or not, to undertake the intended course. Your recommendation is strictly confidential and will be only utilized in the current selection. Please add an additional page if necessary.

City, date

Signature