RECOMMENDATION FORM FOR STUDENT APPLICANT

Statement of F (Confidential)	Personal Qualification
Date:	
Dear	:
Greetings!	
	has applied for admission to the
Colegio de S	an Juan de Letran Calamba Graduate School (please check and indicate):
DOCTO	RAL LEVEL
()	Doctor of Philosophy in Management (PhDM)
() () ()	Doctor of Philosophy in Management Major in Information Technology Management (PhD-ITM) Major in People Management (PhD-PM) Major in School Management (PhD-SM)
MASTER	AL LEVEL
()	Master in Business Administration
() () () ()	Master in Management (MM) major in: Engineering Management (MM-EM) Government Management (MM-GM) Information Technology Management (MM-ITM) People Management (MM-PM) Productivity and Quality Management (MM-PQM)
()	Master of Arts in Education major in: Educational Management (MAEd)
The individua evaluator.	al applicant named above has chosen you as academic/employment reference/
We shall be phis/her capab	bleased if you could accomplish the attached questionnaire to help us better assess bilities.
Please send email as indic	this referral form to us through the applicant in a sealed envelope or by mail, fax, or cated below.
Thank you fo	r your honest evaluation of the applicant.
Sincerely,	
Dean, Gradu	ate School and Center for

Lifelong Learning and Professional Studies



Colegio de San Juan de Letran Calamba

City of Calamba, Laguna, Philippines • www.letran-calamba.edu.ph • +63(049)-5455453

Graduate School and Center for Lifelong Learning and Professional Studies

Referral Questions: 1. How long have you k ————	nown the applicant	, and as wha	:?				
2. How did you know the	. How did you know the applicant?						
3. Please comment on t	the applicant's mor	al behavior					
5. Thease comment of the	пе аррисант з тют	ai benavior.					
4. Please assess (by ch	necking) the applica	nt's success	for Graduat	e Studies in	:		
AREA	OUTSTANDING (5)	VERY GOOD (4)	GOOD (3)	FAIR (2)	POOR (1)		
Critical Thinking							
Classroom/ Work Performance							
Diligence Study/							
Work Habits							
Interactive Ability							
Oral English Competence							
Leadership Ability							
Research Potentials							
Physical Fitness							
Teamwork							
Further Comments:							
Calamba Gradua							
	total appreciation o applicant to the Co						
understand that my personal in am required to provide truthful i		ed by RA 1017	'3, Data Priva	acy Act of 201	2, and that I		
Printed Name:							
Position :							
Name of Company / Institution	on / Agency (Addre	ss):					
Tel. No.(s)	Em	nail:					
Date Received Referral Forn	n:	Date	e Returned:		STUATE SOUTO		

