

## TOKYO CHRISTIAN UNIVERSITY East Asia Institute

## **Academic Reference**

## For Applicants to the East Asia Institute at Tokyo Christian University

## To the applicant

Give this form to your college departmental head or another professor with whom you have studied to complete the form. Ask him/her to give you this reference in a sealed envelope with his/her signature over the seal and send it TCU at: Academic Affairs Office, Tokyo Christian University, 3-301-5-1, Uchino, Inzai City, Chiba, 270-1347 JAPAN. Alternatively, the professor may send this form via email at <a href="mailto:eai@tci.ac.ip">eai@tci.ac.ip</a>. Email submission is only acceptable if the professor him/herself directly sends it to the EAI Office. It is not acceptable if sent from the applicant him/herself.

I willingly waive my right to see this recommendation, knowing that this waiver is not a condition for admission.

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Name of applica	nnt Signature
(https://www.tci.language, history,	r lapplicant is applying to Tokyo Christian University's semester-abroad program, the East Asia Institute ac.jp/english/eai/eai). If accepted, he/she will enroll full-time in undergraduate-level courses in Japanese religion, and/or other courses. Please give your written opinion of his/her potential for academic success is important that you be frank, fair, accurate, and non-inflationary in your evaluation.
1. How long have	you known the applicant and in what capacity? How long? In what capacity?
2. How well do y	ou know him/her (select one)? $\Box$ Very well $\Box$ Well $\Box$ Casually
•	nation, does the applicant have the ability to manage full-time studies in a rigorous academic Please comment. If necessary, please add another sheet.
4. Do you have an □Yes □No	ny reservations about the applicant studying abroad at Tokyo Christian University (select one)?  If yes, please comment. If necessary, please add another sheet.
5. Overall evalua	tion (select one): $\Box$ I recommend the applicant. $\Box$ I do not recommend the applicant.
	$\Box$ I recommend the applicant with this reservation (please comment).
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Name	Position
School Name	Department
Address	
Phone	Email
Signature	Date