

APPLICANT'S NAME:

PROGRAMME OF STUDY:

- Computer Imagery Distributed Systems Wireless Communications Micro and Nano Technologies

The above student is applying to ESIEE Paris for admission to a graduate programme. To assist us in the selection process, we should be most grateful if you could complete the four sections of this form.

1. (a) How long have you known the applicant?

1. (b) In what capacity do you know the applicant?

If you are an academic referee, please indicate the cohort against whom you are measuring the applicant (e.g. number of students/all students in current year/ all students you have ever taught):

2. Please assess the applicant on a scale of 1 to 5 in relation to the following criteria by circling the appropriate number:

	Low	Average	Good	Very good	Excellent	Unable to comment
Intellectual ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation for studies in France	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written communication skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral communication skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall assessment of applicant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Amongst your students, would you say the applicant is in the top:

- 50% 25% 10% 5% 2% Unable to comment

4. Recommendation (✓)

- I strongly recommend this applicant for the above programme of study.
- I recommend this applicant for the above programme of study.
- I do not recommend this applicant for the above programme of study.
- I am unable to comment.

5. Comments

CONTACT DETAILS

Name: Position: Tel:

Email: Date: Signature:

Thank you for your co-operation in completing this form. Please enclose this form and each letter in a sealed envelope and sign across the seal before returning it to the applicant.