

Master of Management in International Business (International Program)

Department of Commerce

Faculty of Commerce and Accountancy, Chulalongkorn University

Phyathai, Pathumwan Bangkok 10330, THAILAND

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Fax: +662 218 5765, +662 218 5913

LETTER OF RECOMMENDATION FORM

This section is to be completed by applicant.						
	Title (Mr. /Mrs. /Miss/ Ms.) First (given) Name			Last (family/surname) Name		
			, ,			
	Address and Street					
	City	Province / State	Postal Code	Country		
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Applicant: This form is to be completed by persons who are able to comment on your qualification for graduate study. Two recommendation letters are required.						
I waive my right to review this recommendation.						
	I do not waive my right to review this recommendation.					
Applicant Signature Date//						
	() Please print your name					
	Please print your name					

Instruction to the recommender

The person named above is applying for admission to the Master of Management Program at Chulalongkorn University. You have been selected by the applicant to submit your comments on the applicant's qualifications. Please enclose this form in the envelope addressed to the applicant, sign your name across the envelope seal, and return it to the candidate for submission to the program. Thank you for your cooperation and assistance.

Recommender					
	Title (Mr. /Mrs. /Miss/ Ms.) First (given) Name		Last (family/surname) Name		
	Position / Title		Organization		
	Address and Street				
	City	Province / State	Postal Code	Country	
How long have you known the applicant?years months					
In what capacity have you known the applicant?					
In case the applicant was your student, he or she was your student in a class of					
(PI	ease specify number of	students enrolled.)			

Please complete the rating grid by evaluating the applicant in relation to other candidates you have known in a similar capacity.

	Excellent	Very good	Good	Average	Below Average	Insufficient information
Conceptual ability						
Analytical ability						
Ability to work with others						
Ability to work Independently						
Intellectual Potential						
Initiative						

Please provi	Please provide any additional information that may help the Admissions Committee in its decision				
making proc	making process, with particular emphasis on character, responsibility, and academic promise. If				
you use a se	eparate sheet, please attach it to this form.				
-					
Please indica	ate your overall evaluation of this applicant for Master of Management Program.				
	Strongly recommend Recommend				
	Recommend with reservations Do not recommend				
Signature	Date				
Mail to					
man to					
	Master of Management in International Business (International Program)				
	Department of Commerce				
	Faculty of Commerce and Accountancy, Chulalongkorn University				
	Phyathai, Pathumwan Bangkok 10330, THAILAND				
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