

LETTER OF RECOMMENDATION  
(NON-SCHOLARSHIP)

To : Dean  
Graduate School of Health Sciences  
University of the Ryukyus

Recommendee

Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Nationality: \_\_\_\_\_

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\* English Language Proficiency: Please evaluate recommendee's level and fill in with an (×) where appropriate.

	Excellent	Good	Fair
Reading			
Writing			
Speaking			

Date: \_\_\_\_\_ , \_\_\_\_\_  
(month) (day) (year)

Recommender

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Title and Institution (or Company): \_\_\_\_\_

Present Address: \_\_\_\_\_