机密推荐书 A

CONFIDENTIAL RECMMENDATION FORM

To be completed by the applicant.(1	mnoutont I					
T I I I I I I I I I I I I I I I I I I I	шрогіані. 1	∟eave no bla	ank except	*)		
申请人姓名	中文			英文		
Name of Applicant:	(in Chir	nese):		(in Englis	sh)	
申请学校名称	中文			英文		
Institute of choice:	(in Chin	ese):		(in Englis	sh)	
拟攻读课程						
Programme applied for ()						
	s programn	ne	Doctoral p	rogramme		
报考专业	中文			英文		
Field:		ese):		O	1)	
报考专业	中文			英文		
Research Topic:				· (in English	1)	
*毋必要填写。倘若须用英文名称!	以便推荐人参	多考,请填	写。			
Optional. Please fill in only if Engli	sh reference	is require	ed by the	referee		
Please rate the applicant's abi students you Have taught or other		_		comparison	with othe	
	优异 Excellent	良好		普通及以下	:	er
	优异 Excellent	良好 Good	满意 Satisfactory	普通及以下 Average	: 无从判断 Nobasis for	er
智能(Intellectual ability)	优异 Excellent (upper5%	良好 Good :) (6-20%)	满意 Satisfactory (21-50%)	普通及以下 Average Or below	: 无从判断 Nobasis for Judgment	er
智能(Intellectual ability) 对拟攻读学科之知识程度 (Knowledge in subject of proposed stud	优异 Excellent (upper5% ()	良好 Good () (6-20%) ()	满意 Satisfactory (21-50%) ()	普通及以下 Average Or below (lower50%)	: 无从判断 Nobasis for Judgment	er
对拟攻读学科之知识程度	优异 Excellent (upper5% ()	良好 Good () (6-20%) ()	满意 Satisfactory (21-50%) ()	普通及以下 Average Or below (lower50%)	: 无从判断 Nobasis for Judgment ()	er
对拟攻读学科之知识程度 (Knowledge in subject of proposed stud	优异 Excellent (upper5% ()	良好 Good () (6-20%) () ()	满意 Satisfactory (21-50%) ()	普通及以下 Average Or below (lower50%) ()	: 无从判断 Nobasis for Judgment ()	er
对拟攻读学科之知识程度 (Knowledge in subject of proposed stud 中文程度(Knowledge of Chinese)	优异 Excellent (upper5% () y) ()	良好 Good () (6-20%) () ()	满意 Satisfactory (21-50%) () ()	普通及以下 Average Or below (lower50%) ()	: 无从判断 Nobasis for Judgment ()	er

接"机密推荐书"A

Attach a separate sheet if Necessary.

2、	请写出对申请人之评语以供甄别参考。	如有需要请另纸书写附上.
	Please give general comments which may	be of assistance in assessing the applicant.

3、请以√符号加于适行	合之空格以表示对申	可请人之推荐程度	
Please indicate the stre	ngth of your recomi	nendation by a "√" i	n the appropriate box
()	()	()	()
极为推荐	乐于推荐	仅可推荐	不予推荐
Highly recommended	Recommended	Recommended	Not recommended
		With reservations	
推荐人姓名		签署	
Referee's Name:		Signature:	
请用正楷(in Block Le	tters)		
职 位		日 期	
Position:		Date:	
学术机构职称			
Name of Educational In	nstitute:		
学术机构地址			
Address of Institute: -			
电 话			
Telephone No:			

注意:请推荐人填妥后,密封此推荐书,并在封口处签名,交由申请人交回本报名点。 A Note For The Referee:

Please seal this form after completion, sign on the sealed part and pass it back to The applicant for submission to the office \circ

机密推荐书 B

CONFIDENTIAL RECMMENDATION FORM

1、下列各项由申请人填写(注意:	必須	页填写*以	人外名	\$项)						
To be completed by the applicant.(In	npo	rtant. Le	ave	no bla	nk e	cept	*)			
申请人姓名	片	中文					文英	ζ		
Name of Applicant:	(i	in Chine	se):				(iı	n Engli	sh)	
申请学校名称	F	中文					英	文		
Institute of choice:	(i	in Chine	se):				(ir	n Englis	sh)	
拟攻读课程										
Programme applied for ()硕	士语	程		()	博士	课程			
Master' s	pro	gramme	9]	Doct	oral j	progra	amme		
报考专业	中						英文			
Field:			se):						h)	
报考专业	, ,						文英			
Research Topic:							- (in	Englis	h)	
*毋必要填写。倘若须用英文名称以										
Optional. Please fill in only if English	h re	ference	is r	equire	d by	the	refei	ee		
(1)请就表中所列各项,对申请人 Please rate the applicant's abili students you Have taught or other en	ities mplo Ez	in follo	wing u hav 蒙 Go	charave wor 以好 od S	acter 'ked 满意 Satisfa	istics with actory	or sup 普通及 Ave	parisor pervsed と以下 erage elow	n with l: 无力 No f	h other 以判断 obasis for
智能(Intellectual ability)	()								5
	(,	()		()	()	()
对拟攻读学科之知识程度 (Knowledge in subject of proposed study)
)		()		()	, ,	()	()
(Knowledge in subject of proposed study)	()	()	(()	(()	()
(Knowledge in subject of proposed study 中文程度(Knowledge of Chinese))	()	())	()	()	()

接"机密推荐书"A

Attach a separate sheet if Necessary.

2、	请写出对申请人	人之评语以供甄别参考。	如有需要请另纸书写附上.	
I	Please give gener	ral comments which may	be of assistance in assessing	the applicant .

3、请以√符号加于适行	合之空格以表示对申	请人之推荐程度	
Please indicate the stre	ngth of your recom	nendation by a "√" i	n the appropriate box
()	()	()	()
极为推荐	乐于推荐	仅可推荐	不予推荐
Highly recommended	Recommended	Recommended	Not recommended
		With reservations	
推荐人姓名		签署	
Referee's Name:		Signature:	
请用正楷(in Block Le	tters)		
职 位		日 期	
Position:		Date:	
学术机构职称			
Name of Educational In	nstitute:		
学术机构地址			
Address of Institute: -			
电 话			
Telephone No:			

注意:请推荐人填妥后,密封此推荐书,并在封口处签名,交由申请人交回本报名点。 A Note For The Referee:

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