

Department of Chemistry MAHIDOL UNIVERSITY

RECOMMENDATION FORMRecommender: See below for instructions. Staple

this form to the top of your letter.

This recommendation must be received by the Department by December, 12, 2008.

Application for academic year 2552 TO BE COMPLETED BY THE APPLICANT:

Background for proposed study

Applicant: Please type of print. Give this form and an envelope to the person whom you have asked to recommend you. When that person returns the sealed envelope to you, include it with your other application materials. Name of applicant: _____ (family name) Current mailing address: Propose field and degree program: _______ Degree applied: □ M.Sc. □ Ph.D. Recommender's name: ______ Title: _____ Institution/Company: ______ Department: _____ Recommender's E-mail: Signature of applicant: Date: TO BE COMPLETED BY THE RECOMMENDER: The person named above is applying for admission to the Graduate Program in Chemistry at Mahidol University. We would appreciate your personal impressions of the applicant's capacity for success as a graduate student. If possible, compare the applicant to other students known to you who have attended or who are now applying for admission to the program. 1. How long have you known the applicant? _____ years How well do you know the applicant? ☐ Casually ☐ Very well ■ Well In what capacity have you known the applicant? ☐ Lecturer in one class ☐ Lecturer in more than one class ☐ Undergraduate research advisor ☐ Graduate research advisor ☐ Employer ☐ Other (specify) _____ 2. Please compare the applicant with one of the following (check one): ☐ Undergraduates from your institution who have gone on to graduate study ☐ Current senior undergraduates at your institution ☐ Other: Top 2 % Top 5% Top 10% Top 20% Top 50% Bottom 50% Intellectual potential Analytical ability Creativity and originality Laboratory skill (if applicable) Perseverance towards goals **Emotional maturity** Motivation for graduate study

3. Additional information about the applicant

Please type or print your letter. Write candidly about the applicant to provide additional information which will serve as additional credentials for the applicant's admission to the Graduate Program. Indicate how long and in what capacity you have known the applicant. Discuss the applicant's qualifications and potential to carry on advanced study in the specified field, as well as his or her promise of professional success. In describing such attributes as motivation, intellect, and maturity, discuss both strong and weak points. Indicate rank in class, if possible. Compare the applicant with others you have recommended who have attended or are attending the Graduate Program in Chemistry at Mahidol University.

4. Summary			(The letter can be written in Thai or in English.)
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	Institution:		Address:

Mailing the completed recommendation letter: Please seal the recommendation letter and this completed form in an envelope and sign your name across the seal. Return the signed, sealed envelope to the applicant well before the deadline indicated. Alternatively, you may send it directly to the Director of Graduate Program in Chemistry, Department of Chemistry, Faculty of Science, Mahidol University, Rama 6 Road, Rajdhevee, Bangkok 10400. Tel: (02)-201-5110 or Fax: (02)-354-7151.

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Institution: Address:			Telephone:
	Institution:		Address:

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Name:		☐ Not recommended	
Name:	Signature:		Date:
E-mail address: Telephone:	Name:		Title:
Institution: Address:			Telephone:
	Institution:		Address:

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Statement of Purpose

APPLICANT: Please provide name

(First)	(Last)	

Please mail to: Director of the Graduate Program in Chemistry

Signature: _____ Date: ___

Department of Chemistry, Faculty of Science, Mahidol University

Rama 6 Road, Bangkok 10400

(Please specify the filed of study, e.g. organic chemistry, inorganic chemistry, analytical chemistry, physical chemistry, chemical physics or polymer science at the lower right corner of the envelope containing documents sent to the Department of Chemistry)

Applicant: Please type or print			
Name of applicant:			
Name of applicant:		(family name)	
Current E-mail address:			
Proposed field and degree prog	ram:	Degree applied: \square M.Sc. \square Ph.D.	
Signature of applicant:		Date:	
Information can be filled either in T Awards/Distinctions: List acade		llowships or other distinctions you have r	eceived.
Work/Research Experience: L	ist research activities or emplo	yment occupation relevant to your gradua	nte goals.
Publications: If relevant to your	proposed field of study, pleas	se list your publications and any scholarly	activities.
for graduate study, your particu	lar area of specialization withinformation that may aid the se	tional sheet, please state your purpose in a n chemistry, your plans for future occupa election committee in evaluating your prep	tion or
If you have discussed your plan person's name:	,	culty member in the Department, please lis	st that