

Letter of Recommendation

**DIRE-DAWA UNIVERSITY
OFFICE OF THE REGISTRAR
APPLICATION FOR GRADUATE ADMISSION**

Letter of Recommendation for Graduate Study

Full Name of Applicant (*in BLOCK letters*):

Planned Field of Study:

(To be filled out by a university instructor/advisor, previous/current employer, or by a member of a professional association)

The candidate mentioned above has applied for admission into the School of Graduate Studies of Dire Dawa University. The Office of the Registrar will greatly appreciate your assistance in evaluation of the applicant for the graduate program she/he applied. Please provide a genuine response to the following queries. The information you provide will be kept confidential.

1. For how long and in what capacity have you known the candidate?

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2. Give your evaluation of the applicant's academic potential to pursue graduate studies.

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3. State the candidate's special points of strength and/or weakness in his/her area of specialization

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4. State how the graduate program in the area of the candidate's specialization will equip the candidate to serve the best interest of the country better than with the education he/she now has

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5. Describe the candidate's character and ability specially with respect to withstanding the rigors of graduate studies, and professional commitment.

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Name Position.....

Date Signature

Organization

P.O.Box.....Town/City.....Country

FaxE-mailTelephone

Please seal and sign on the postage mail the completed form directly to the following address

**OFFICE OF THE REGISTRAR
DIRE-DAWA UNIVERSITY
P.O.BOX 1362
DIRE DAWA, ETHIOPIA**