

DIRE-DAWA UNIVERSITY OFFICE OF THE UNIVERSITY REGISTRAR FORM –B SGS/07 APPLICATION FOR GRADUATE ADMISSION

Letter of Recommendation for Graduate Study

FULL NAME OF APPLICANT ------

DEGREE SOUGHT-----PROPOSED FIELD OF STUDY

The above mentioned candidate has applied for admission to the school of graduate of Dire-Dawa University. The office of the registrar will greatly value your assistance in helping the candidate. Please kindly supply genuine answers to the following questions. The information provided will be confidential. Please mail the completed form directly to:

OFFICE OF THE REGISTRAR

DIRE-DAWA UNIVERSITY

P.O.BOX 1362

DIRE-DAWA, ETHIOPIA

TO BE COMPLETED BY THE RECOMMENDER:

I. HOW LONG HAVE YOU KNOWN THE APPLICANT? II. IN WHAT CAPACITY HAVE YOU KNOWN THE APPLICANT? TEACHER OF PROFESION------EMPLOYER OR JOB SUPERVISOR------RESEARCH ADVISOR-------OTHER (PLEASE SPECIFY) ---- -III. PLEASE PROVIDE A CANDIDATE EVALUATION OF THE APPLICANT'S PAST PERFORMANCE AND ABILITY TO PURSE AND SUCCESSFULLY COMPLETE A PROGRAM OF STUDY IN THE PROPOSED FIELD.

IV. IN THE RATING CHART BELOW PLEASE EVALUATE THE APPLICANT IN COMPARISION WITH OTHER STUDENTS WHOM YOU HAVE KNOWN DURING YOUR PROFESSIONAL CAREER.

	Excellent	Good	Fair	Poor	Unable to
					judge
Research ability					
Command of field					
of study					
Written English					
Oral English					
General Education					
Potential as a					
Teacher					

V. PLEASE INDICATE WHERE THE APPLICANT WOULD RANK AMONG STUDENTS CURRENTLY IN YOUR DEPARTMENT.

Below Averag	Averag e	satisfactor y	Good	Very Good	Outstandi ng	Truly Exceptiona 1	Inadequate opportunity to observe
Eowest 40%	Middle 45-59%	60-74%	5-89%	90-100%			

VI. PLEASE CHECK, AS APPRPORIATE

I RECOMMEND THIS APPLICANT STRONGLY I RECOMMEND THIS APPLICANT I RECOMMEND THIS APPLICAT WITH RESERVATION I DO NOT RECOMMEND THIS APPLICANT NAME AND TITILE (PRINT)	
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Please put in a sealed envelope, stamp and send to the above address. The confidentiality will be respected by Dire-Dawa University.



DIRE-DAWA UNIVERSITY

OFFICE OF THE UNIVERSITY REGISTRAR APPLICATION FOR GRADUATE ADMISSION

FORM -C SGS/07

LETTER OF SPONSORSHIP FOR GRADUATE STUDY

(To be filled out and signed by the Head of the Organization)

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

On the behalf of ------ the organization of which I am a head, I am committing the said Organization to grant a financial support or employment to ------In the course of his/her postgraduate training in ------The financial support or employment, which is intended to cover the living expenses of the graduate student, will be maintained until the termination of the program of study. Moreover, I express the organization agreement to refrain from obligating the graduate student to undertake extra work assignments, which may jeopardize his/her, program of study. I am cognizant of the fact that the concrete realities of the country dictate that education in general, and postgraduate studies in particular, must be geared towards the solution of specific problems affecting the society. I am, therefore, aware that this specific training my Organization is sponsoring must be geared towards fulfilling a definite purpose. Accordingly through my signature affixed below, I am committing my organization to maintain an appropriate position of employment for the student after the completion. Date-----Office seal-----Position-----

Organization ------ Address------



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

FORM -D SGS/07

SELF SPONSORSHIP FORM FRO GRADUATE STUDY (To be filled out and signed by the applicant)

NAME OF THE APPLICANT	
EMPLOYER/INSITITUTION	REGION
ZONE	-CITY/TOWN
PROGRAM INTENDED TO JOIN	

I the undersigned candidate firmly commits to fully sponsor myself and pay the entire necessary tuition fee if I secure admission and abides am the academic rules and regulations of Dire-Dawa University.

Signature-----

Date-----