

in cooperation with



Undergraduate ProgramsLetter of Recommendation

To the applicant:

Please print your name and program you are applying for in the space provided below. Then send this form to	your r	eferee for
completion and submittal to the Hellenic American College Admissions Office.		

Applicant Name:				
Program:				
To the referee:				
American College. It wou provided or attach a sepa	uld be of great assistance to the University	r's undergraduate programs offered in Athens, Greece through Hellenic ersity if you would kindly complete this form. You may use the space you provide will remain strictly confidential. When you have completed		
Last Name:		First Name:		
Position Held:		Institution / Company:		
Home Address:		Business Address:		
Street & Number:		Street & Number:		
City & Postal Code:		City & Postal Code:		
Country:		Country:		
Telephone:		Telephone & Fax:		
E-mail:		E-mail:		
Mobile:				
1. How long have you k	known the applicant and in what cap	pacity?		
2. What do you consider to be the applicant's outstanding qualities?				

3. What do you consider to be the applicant's most significant limitations?				
4. Do you have any additional comments which would be hel	pful for our assessment of the applicant?			
Signature	Date			

