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| Büro für Internationales  Studierendenmobilität und internationale Studierende  Technische Universität Berlin  Sekr. Int SB  Straße des 17. Juni 135  10623 Berlin |  |  |

**Letter of Recommendation**

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| for the student | | |  | | | | | | | | | |
|  | | | student name | | | | | | | | | |
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| **Please comment on the following points**   * Where, when and under what circumstances did you meet the applicant?   (e.g. lectures courses, presentation)   * Evaluation of the applicant’s performance during his/her studies * General impression of student in regard to his/her academic qualities | | | | | | | | | | | | |
| **Summary Evaluation**  In comparison with other students who have had equivalent training, I rate this applicant as | | | | | | | | | | | | |
|  | top 5 % | | |  | top 10 % | | |  | first 20 % | |  | first 25 % |
|  | upper half | | | ⬜ | lower half | | |  | unknown | |  |  |
|  | | | | | | | | | | | | |
| Name | |  | | | |  | Staff position | | |  | | |
|  | | please print | | | |  | | | |  | | |
| Stempel | | | | | |  | Department | | |  | | |
|  |  | | |  | | |
|  | Date | | |  | | |
|  |  | | |  | | |
|  | Signature | | |  | | |
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