

HIF Reference Form

- To be completed by the applicant's current or most recent instructor of Japanese.
- Please directly send this form to jj@hif.or.jp by March 21, 2021 (Eastern Daylight Time).
- 日本語が母語の方は日本語でお願いします。

<Information of the REFREE>

Name	
Position	
Institution	
E-mail	
Phone	

<Information of the APPLICANT>

Name	
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1. Please describe how long and in which capacity you have known the applicant.

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2. Please check the appropriate box to rate the applicant according to the criteria below, using a scale of 1 to 5 or NB (No Basis for Judgement).

A score of 5 = Excellent, and a score of 1 = Unacceptable.

<Class Performance and Writing Assignments>					
a) <u>CRITICAL THINKING SKILLS</u> : examines and analyzes things objectively; thinks logically					
□5	□4	□3	□2	□1	□NB
<Learning Attitude>					
b) <u>ACTIVENESS</u> : takes initiative; acts and thinks positively; self-motivated					
□5	□4	□3	□2	□1	□NB
c) <u>RESPONSIBILITY</u> : deals with situations conscientiously and to completion; takes responsibility for deadlines/attendances; sincere and reliable					
□5	□4	□3	□2	□1	□NB
<Class Performance and Extra-Curricular Activities>					
d) <u>SOCIALIZING SKILLS</u> : understands different values; adaptable in group settings; ability to build personal relationships; courteous					
□5	□4	□3	□2	□1	□NB
e) <u>EMOTIONAL STABILITY</u> : emotions and self-control appropriate to situations; not prone to panic or inappropriate emotional outbursts in stressful situations					
□5	□4	□3	□2	□1	□NB
f) <u>COMMUNICATION ABILITY</u> : sincere attitude and understanding when listening to the others; talks clearly and effectively for the situation, cooperativeness					
□5	□4	□3	□2	□1	□NB

3. Please check all that apply.

a) If this applicant participates in this program in which a lot of interactions with others are required, they can

- manage daily conversations with native speakers
- make a presentation on a social topic
- manage discussions with peer students in the same level
- others

b) If this student works on a project with their peer students, they can

- lead other students to the goal
- work together in a cooperative manner
- accomplish their goal without giving up
- work independently

4. Please give us your candid opinion about the applicant.

5. Please check the appropriate box to indicate your recommendation for this applicant.

<input type="checkbox"/> I recommend this applicant strongly. <input type="checkbox"/> I recommend this applicant. <input type="checkbox"/> I recommend this applicant with reservation. <input type="checkbox"/> I do not recommend this applicant.

6. Electronic Signature

I certify that all the information in my reference is accurate and true and that I am the person submitting the reference.	
Signature	
Date	