(FORM 4)

**Letter of Recommendation from Prospective RA Instructor**

Please write this letter of recommendation, put it in an envelope, seal it tightly, write the name and affiliation of the applicant on the address side of the envelope, and submit it to RA secretariat at ISAS (Kohira or Takimoto at Room#1208) by 12:00 p.m. of April 24 (Mon.), 2017.

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| Name of Applicant: | |
| Recommendation: | |
| Priority of recommendation (level):  　　　Please circle appropriate number below.  　　　　1. Highly recommended  　　　　2. Recommended  　　　 3. If budget allows  　　　　4. Not recommended | |
| Priority of recommendation (rank):  N-th out of (total number of applicants you recommend) | |
| RA instructor’s name and affiliation  (autograph or seal) | L. S. |