

TO BE COMPLETED BY APPLICANT

Name of Student

Program you are applying for:

Junior Program of Business Administration: Specialization: _____ (f. e. Food, Retail, Fashion)

Semester in German: Degree Program: _____ Semester Block: _____

Name of the Reference

I hereby waive my right of access to this recommendation.

.....
Signature of student

.....
Date

TO BE COMPLETED BY REFERENCE

Referee's name and academic title: _____

Position

Subject

University

Email Address

How long and in what capacity have you known the applicant?

| Please rate the applicant's | Very high | High | Average | Low |
|--------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Academic capacity | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Academic interest & motivation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ability to interact well with others | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Emotional stability and maturity | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Motivation for study abroad | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Your recommendation and any additional remarks to help assess the applicant:

If student applies for DHBW Heilbronn Academic Scholarship for Incoming Students:

I highly recommend the student to be considered for the Academic Scholarship for the following reasons:

Degree of approval

Full approval Approval With reservation

.....
 Place, Date

.....
 Referee's Signature, Stamp or Seal