European Masters Program in Language and Communication Technologies (LCT)

Letter of Recommendation
(For EU and non-EU applicants)

Applicant Name

Current Address

IF YOU PREFER, YOU CAN ANSWER QUESTIONS 4-6 ON A SEPARATE SHEET OF PAPER. PLEASE REMEMBER TO SIGN THIS FORM AT THE END AND ON ALL OTHER SHEETS YOU PROVIDE.

Please upload this Letter of Recommendation using your referee account or send it directly to

LCT Administration

Computational Linguistics & Phonetics C7.2

Saarland University P.O. Box 15 11 50

66041 Saarbruecken
Germany

DEADLINE FOR THIS YEAR IS 01.03.2024

PLEASE ANSWER ALL QUESTIONS IN ENGLISH.

1) HOW LONG AND IN WHAT FUNCTION HAVE YOU KNOWN THE APPLICANT?

2) HOW DOES THIS STUDENT COMPARE ACADEMICALLY TO OTHER STUDENTS YOU HAVE TAUGHT?

○ excellent (upper 10%)

○ above average

○ average

○ below average

○ no basis for judgment

3) DO YOU RECOMMEND THE STUDENT FOR MS_C LEVEL STUDIES?

○ strongly recommend

○ recommend

○ recommend with reservations

○ no recommendation

4) DESCRIBE THE QUALITY OF THE APPLICANT'S INTELLECTUAL POTENTIAL AND COMMENT ON THE STUDENT'S ORIGINALITY OF THOUGHT AND ABILITY TO GRASP DIFFICULT CONCEPTS:

5) HOW DO YOU JUDGE THE APPLICANT'S PREVIOUS RESEARCH (IF APPLICABLE), SCIENTIFIC KNOWLEDGE, ABILITY TO WORK IN GROUPS, ABILITY TO WORK INDEPENDENTLY, ABILITY TO ANALYZE AND SOLVE PROBLEMS, MATHEMATICAL SKILLS?

6) PLEASE PROVIDE REASONS FOR YOUR RECOMMENDATION:

NAME AND TITLE

POSITION/ FUNCTION

ADDRESS

NAME OF INSTITUTION,DEPARTMENT

PHONE

E-MAIL

LinkedIn Profile or Website URL

DATE

SIGNATURE