

## Letter of Recommendation

This form serves as a supplement to the application for a WiRe fellowship of a researcher with whom you would like to cooperate in Münster. Please fill in the fields, sign it and email it to [wire@wwu.de](mailto:wire@wwu.de).

If the applicant applies for an on-site research stay, by sending the signed form you confirm your capacity to provide the applicant with a workplace and, if necessary, additional equipment (lab availability, etc.) during the proposed research period.

If you have decided with the applicant to utilize the matching-option for an extension of the regular fellowship period, please state this below.

If you have any questions, please contact the WiRe team: [wire@wwu.de](mailto:wire@wwu.de) // 0251 / 83 22254.

### Candidate Information

Name

### Referee Information

Name

Title

Email

Institute / Faculty

Joint Research Project

### General Evaluation

Please rate the candidate according the following criteria

	Very Good	Good	Average	Poor	Weak	Unable to access
Contribution to her field						
Theoretical knowledge						
Computing ability						
Analytical ability						
General Academic						
Motivation / Commitment						
Reliability						
Communication skills						
Standard of English						

Your ranking of the applicant among a total of	PhDs and Postdocs you have supervised so far					
Top	5%	10%	20%	30%	50%	Unable to access

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Page 2

### Relationship to Candidate

Professional	Academic	Tutor
Friend	other	

### Period of time you have known the applicant

Less than a year	One to two years
Two to four years	More than four years

### Letter of Recommendation (page 1/2)

