UNIVERSITY OF MORATUWA FACULTY OF INFORMATION TECHNOLOGY DEPARTMENT OF COMPUTATIONAL MATHEMATICS

LETTER OF RECOMMENDATION FOR MAS TER OF S CIENCE/POS TGRADUATE DIPLOMA IN ARTIFICIAL INTELLIGENCE

CONFIDENTIAL

Note to candidates: Please enter your name below and forward this form to your referee requesting that it be completed and returned under sealed envelope to: Coordinator, M.Sc. in Artificial Intelligence, Department of Computational Mathematics, Faculty of Information Technology, University of Moratuwa, Katubedda, Moratuwa

1. Full Name of Applicant (Underline surname):

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

3. What do you consider are his/her major talents or strengths?

4. What do you consider his/her major liabilities or weaknesses?

5. What do you think are the applicant's reasons for deciding to take this course ? Do you think that these reasons are sound?

6. Please indicate how the applicant relates to the group in which you know h im/her.							
Quality/Skills	Outstanding	Very good	Good	Average	Poor		
(a) Intellectual ability							
(b) Originality of work							
(c) Managerial ability							
(d) Technology interest							
7. Does the applicant show any evidence of career, personality or emot ional problems? If so please explain.							
 8. If you are the employer or manager of this candidate, how will this training benefit his/her future career within your organisation and how does it contribute to your organisation? 9. Any other comments : 							
Name of the Referee :			Position :				

Name of the Referee :		Position :	
Signature :		Office address :	
Date:		onice address .	
e-mail:		Phone:	
		Fax:	