









Evaluation for Admission to Erasmus Mundus MSc in Computational Mechanics

A To be comple	eted by the applicant			
Family Name:				
Name:				
Address:				
e-mail:				
Telephone:				
Fax:				
Applicant's signa				
	Date:			
_				
	eted by evaluator			
Evaluator's name:				
Title:				
Address				
Date:	Telephone number:			
School or compan				
Telephone numbe				
In what capacity do you know the applicant?				
, ,				
How long have you known the applicant?				
Tiow long have you	u known the applicant:			
Please include sor	me information about your professional/educational background			
and areas of expertise:				











Please rank the applicant within their peer group:

	Excellent (Top 5%)	Very Good (Top 25%)	Average (Top 50%)	Below Average
Intellectual ability				
Academic performance				
Work habits				
Capacity for original thinking				
Motivation & Maturity				
Leadership qualities				
English language (if not first language)				

Personal evaluation of the applicant. Information about accomplishments in research or independent projects will be particularly helpful. If you have any reason to believe that the applicant should not be considered, please explain below. Continue in a separate sheet if necessary.
Evaluator's signature:
Date:
Places insert in a signed and appled envelope

Please insert in a signed and sealed envelope.