University of Washington Department of Asian Languages & Literature

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Home Department Statement of Support

to be turned in by applicants who are current UW students

Students enrolled in the Department of Asian Languages & Literature: Leave this form with your faculty advisor. If you have not yet named a faculty advisor, give the form to the relevant language program coordinator.

Students enrolled in other departments: Leave this form with your academic advisor or the graduate program coordinator.

Name	e:	
Stude	ent number:	
Home	e department:	
Name	e of faculty advisor or graduate program coordinator:	
revie	er the provisions of the Family Education Rights and Privacy A w their educational records. The act further provides that you mmendations. Please indicate below whether or not you wis	ou may waive your right to see
I (circ	cle one:) waive / do not waive my right of access to this re	commendation form.
Applicant	: Signature:	Date:
<u>To be fille</u>	ed out by the faculty advisor, language program coordinator	r, or graduate program coordinator:
The c	quality of graduate work accomplished by the student named	l is:
()	Excellent (of very high quality)	
()	Satisfactory (meets department expectations)	
()	Poor (barely meets, or does not meet, department expects	ations)
The s	tudent's progress toward degree is:	
()	Excellent (exceeds the average rate of progress for student	ts at this level)
()	Satisfactory	
()	Poor	
Addit	cional comments (optional):	
Faculty Si	anatura.	Date: