

ETH ROBOTICS STUDENT FELLOWSHIP

APPLICATION PROGRAM - LETTER OF RECOMENDATION

DETAILS OF REFEREE

Title: First name: Last name: email address: Title of current post: Institution name: Signature: Date:

DETAILS OF STUDENT (APPLICANT)

Title: First name: Last name:

RECOMMENDATION

In what capacity have you know the student?

With respect to the applicant's peers**Please select one rating from the dropdown options**

| | |
|----------------------|--|
| Academic performance | |
| Logical thinking | |
| Project management | |
| Team work | |

English language skills How long have you known the student?

Please attach a letter of recommendation addressing, complementing, or clarifying some or all of the previous fields.

Please return this form by deadline of the application period to robotics-student-fellowship@ethz.ch with the subject: **{student firstname}-{student lastname}-reference-letter-{referee lastname}** , for example:

Subject: JANE-DOE-reference-letter-DOE

Electronic signatures are accepted.**Please use adobe acrobat reader to fill in the form and ensure that the data is visible in the document.**