**추 천 서**

**(Recommendation)**

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(Himchan Hospital Summer Internship Program)

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| **☆ Writing a recommender** (추천자 작성 사항) |
| **Name of Recommender** (추천자 성명) |  | **Affiliation** (소속) |  |
| **Position** (직위) |  | **Period of interaction with applicants** (교류기간) |  ~ ( months) |
| **Relationship with applicant** (관계) |  | **Telephone Number** (전화번호) |  |
| **Address** (주소) |  |
| **Mobile Phone Number** (휴대폰 번호) |  | **E-mail** |  |
| **I recommend the above applicants for the 2023 14th Himchan Hospital Youth Summer Internship Program as follows**.(year) (month) (day) **Recommender:**  Signature**Himchan Hospital Joint Medicine Research Institute** (힘찬병원 관절의학연구소 귀중)  |
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| **Name of Referred Student**(추천학생 성명) |  |

**☆ Please briefly describe the reasons for your recommendation.** (The length and details of the recommendation letter are free-form.)**- Personal qualities, demeanor, attitude, etc.** (추천학생의 개인적인 자질, 품행, 태도 등)**- Grades, commendations, awards, etc.** (성적, 표창, 대회수상 경력 등) |



 Himchan Hospital

▶ How to submit a letter of recommendation

1. If you send it to your teacher: Send the recommendation letter written by the teacher by email to the teacher's account (In this case, you do not need to sign it separately, even if you send it separately from the student's application, if it is received within the application period, it will be collected and received together.) At the time of application, the subject of the email Example) Kim Him-chan - Letter of recommendation
2. If sent by a student: Scan the letter of recommendation and email it with the application (signature is required.)

▶ Inquiries: Himchan Hospital Joint Medicine Research Institute (02) 3219-9229 / himchanhospital@gmail.com