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| Recommendation Letter  |
| *(This form is to be completed by applicant’s direct supervisor who has the authority to release/ confirm the applicant’s participation to join the program)*Please note that your signature on this form signifies your agreement to the following:* to release the applicant from work duties while he/she attends Pre-Course workshop. **This training is full-time and compulsory**.
* to release the applicant from work duties while he/she attends short course program in Australia. **This training is full-time and compulsory**.
* to release the applicant from work duties while he/she attends Post-Course workshop. **This training is full-time and compulsory**.
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| Name of Organisation | Politeknik Negeri Batam |
| Name of Authorised Supervisor | Uuf Brajwidagda |
| Position title of Authorised Supervisor | Director |
| Name of Applicant |       |
| Position title of Applicant | Lecturer |
| Applicant’s Level of position in organisation structure *(eg. Echelon and Golongan)* |       | Date commenced |   /  /     |
| How long have you known the applicant and in what capacity? |       |
| Please make any additional comments about the applicant's potential or personal qualities which you feel would be helpful to the Short Term Award Selection Team. *(additional pages/ documents are accepted)* |       |
| **Authorised Supervisor signature\***On behalf of the organisation, I, the undersigned, agree to be bound to the above commitments and strategies |
| Full Name | Uuf Brajawidagda | Signature & stamp |
| Email | direktur@polibatam.ac.id |  |
| Mobile | 08127038340 |
| Date |     /  /     |