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| **Letter of Nomination** | |
|  |  |
| **Student Name:** | (Student Name) |
| **Date of Birth:** | (Date of Birth) |
| **Home Institution:** | (Home Institution) |
| **Department:** | (Department) |
| **English Proficiency:** | *Student has sufficient English for Research Participation* |
|  |  |
| This is to confirm that we have nominated the above student as a  **POSTECH Summer Program Student**  for YYYY. | |
|  |  |
| **Coordinator:** | (Coordinator Name) |
| **Email:** | (Email of Coordinator) |
| **Date:** | (Date) |
| **Signature:** | (Signature of Coordinator) |
| **Seal:** | (Seal of Institution) |