



Ministério da Educação
Coordenação de Aperfeiçoamento de Pessoal de Nível Superior - CAPES

Adviser's recommendation - English

1. Grantee: **BEX : 0000000**
2. Academic Institution:
3. Degree: **Field of study:**
4. Total grant period: 48 months

5. Adviser's name:
E-mail: **Phone number:**

6. Degree conclusion up to: _____/_____.

7. Program officer at CAPES: **E-mail:**

8. Adviser's recommendation

Dear Sir(Madam): CAPES would appreciate that you evaluate the academic performance of the student, in terms of: Courses/Seminars; General/Comprehensive Exams; Thesis progress; Expected Date of Degree Conclusion.

Signature

Date ____/____/____

Please return this form directly to CAPES:

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