



SCHOOL OF GRADUATE STUDIES

REFEREE CONFIDENTIAL REPORT

The applicant whose name is given below wishes to undertake graduate studies in the University. The University would be grateful for your comments on the candidate's suitability for this programme.

Please return the completed form in a sealed envelope to the applicant who shall submit it directly to: The Dean, School of Graduate Studies, P. O. Box 103-40404, RONGO.

SECTION A: (To be completed by the candidate)

- 1. Name of applicant
2. Degree applied for
3. School to which application is made
4. Field of Study

SECTION B: (To be completed by the referee)

- 1. For how long and in what capacity have you known the applicant?
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.....

2. Please rate the applicant on the following:

Table with 7 columns: Excellent, V.Good, Good, Average, Below Average, Unable to Assess

Academic ability

Ability for persistent & Independent study

Potential for productive scholarship

Quality of previous work

Oral and written expression in English

3. Comment freely on the applicant suitability:

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4. Name of referee (in block letters)

Signature

.....
Designation/Official Stamp

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Date

Referee Address:

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Referee Email Address.....