

Academic Reference Form

Referee name

Position

Department/Institution

E-mail

Phone number

Applicant name

I have known the applicant in my capacity as _____ for _____ years

Please mark the category that best describes the applicant's academic performance in relation to all students at a similar stage of their studies.

	Top 5%	Top 10%	Top 50%	Bottom 50%	Unable to assess
Critical thinking					
Research skills					
Quality of work / academic excellence					
Initiative / ability to work independently					
Flexibility / ability to work in a team					
Writing / presentation skills					
Overall assessment					

Considering the applicant's strengths and weaknesses, please explain your ratings (maximum 1 page):