## Postgraduate Referee Form



The applicant must send this form electronically to each of the referees nominated on the application form.

Applicant								
Family name				First name				
Refe	eree							
Name				Position/title				
University/Company				Phone				
Address				Email				
			],, [					
1. H	low long have you known the applic	ant?	Years	Months	3			
2. B	riefly describe the extent of your kn	owledge of the	applicant's	work includin	g publication	s/papers/ot	her relevant re	search.
3. P	lease rate the applicant's performan	ice in the areas	named held	ow usina vour	present knov	vledae of th	e applicant	
0. 1	reade rate the applicants performal		Tidified bold	ovv domig your	procent knov	vicago or tri	о арриоате.	
		No opportunity	Below		Above			
		to observe	average	Average	average	Good	Very good	Excellent
(i)	Knowledge of own discipline	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
(ii)	Ability to express ideas	$\bigcirc$	$\bigcirc$	Ō	$\bigcirc$	$\bigcirc$	$\overline{\bigcirc}$	$\bigcirc$
(iii)	Command of research techniques	$\bigcirc$	$\circ$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
(iv)	Critical and/or analytical ability	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
(v)	Initiative and motivation	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
(vi)	Ability to plan	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
(vii)	Perseverance in pursuing aims	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
(viii)	Teaching or tutoring ability	$\bigcirc$	$\bigcirc$			$\bigcirc$		$\bigcirc$
(ix)	Aptitude for research	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
	lease comment on the reasons for t							
	ntegrity, in the box below. In particunt the minimum time required.	iar, we would iii	ke to know v	vnetner you tr	iink the appli	cant can co	mpiete a resea	irch degree
 	Title fillillinatif title regalied.							
L								
R	leferee's signature			Date				

The referee is requested to complete, print and sign this report and send to:

Student Administration, PO Box 85084, Lincoln University, Lincoln 7647, Christchurch, New Zealand