

Warnborough College Graduate Programmes

Reference Request Form

APPLICANT *Please complete this section*

Title (eg. Mr, Ms.)	First Name	Middle Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Current Address			Postcode
<input type="text"/>			<input type="text"/>
			Country
			<input type="text"/>

Please read the statement below, tick the appropriate, and sign where indicated.

Warnborough College adheres to Data Protection policies. Under these policies, you have the right, if you enrol at Warnborough, to review your educational records. The Act further provides that you may waive your right to see recommendations for admission. Please indicate below by checking the appropriate box and signing your name whether you wish to waive this right.

- I waive my right of access to this recommendation form.
- I do not waive my right of access to this recommendation form.

Signature

Date

EVALUATOR

The person named above is applying for admission to Warnborough College. We are interested in your assessment of this applicant. Please complete both sides of this form. If you need more space, please use your own letterhead or stationery. You may return this form, along with any attachments, to the applicant in a sealed envelope with your signature across the seal. The application will submit the sealed envelope as part of the admissions application. Or you may mail the recommendation directly to us. *Thank you for your assistance.*

1. How long and under what circumstances have you known the applicant?

2. Please discuss the applicant's strengths.

3. What are the applicant's weaknesses? What efforts has the applicant taken to improve in these areas?

4. How might these strengths and weaknesses affect the applicant's performance on the programme?

5. Based on your experience, please evaluate the applicant in each area using the scale below:

1 = Poor; 2 = Average; 3 = Good; 4 = Very Good; 5 = Excellent

Leadership skills	1	2	3	4	5
Attention to details	1	2	3	4	5
Organisational skills	1	2	3	4	5
Technical skills	1	2	3	4	5
Ability to work in groups	1	2	3	4	5
Performance under stress	1	2	3	4	5
Competence in area of responsibility	1	2	3	4	5
Ability to accept constructive criticism	1	2	3	4	5

Evaluator's Signature

Date

Name

Position or Title

Company

Telephone Number

Address

Postcode

Country

Please complete and return to: The Director of Graduate Admissions, Warnborough College, 316 The Capel Building, Mary's Abbey, Dublin 7, Republic of Ireland.