

Referee Report

ID number	
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CONFIDENTIAL TO FACULTY OF ARTS AND EDUCATION SELECTION PERSONNEL

Please complete this form and email it to: admission@auckland.ac.nz

(referee reports must be directly emailed to us from references only)

	Referee's Name:							
	Referee S Name:							
Referee's Contact To	elephone Number:	Daytime: Business:						
	Referee's Email:							
Applicant's name:								
Name of programme(s) applica	nt has applied for:							
How do you kr	now the applicant?							
Note that a family relative or a close friend cannot act as a referee. If you do not consider you know the applicant well enough to complete this form, please tick box, sign and return.								
Please show how well you know the applicant's work experience, abilities, attitudes and personal qualities, by checking the appropriate category.								
	THOROUGH KNO	DWLEDGE	GENERAL KNOWLEDGE	LITTLE KNOWLEDGE				
Work Experience								
Abilities (Work and/or education)								
Personal qualities								
Do you consider that the applicant								
Do you consider that the applicant has the skills and personal qualities to work with people as a teacher or social worker? Yes No								
Do you consider that the applicant	can be trusted to worl	with children?		Yes No				
Do you consider that the applicant can be trusted to work with children? If no, please provide a justification for your answer.								
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Would you be happy to have this person work with members of your family/whānau Yes No in a professional capacity?								

Have y	you ever had any reason to doubt the applicant's honesty?		Yes	□ No		
•	u know of any disciplinary or legal processes involving the applicant? please tell us what these processes are.		Yes	□ No		
Please	e list three strengths that you believe the applicant brings to teaching/social work:					
	re is anything else you think we should take into consideration in deciding whether or not please tell us below:	t the app	olicant is suitable fo	r teaching or social		
Please	e indicate your evaluation of the applicant in the areas listed below by chec	cking t	he appropriate s	spaces.		
1	Establishes and maintains connection with people, demonstrating empathy, respect an Low High or Uncertain	nd genui		portunity to observe		
2	Sensitive to non-verbal communication. Low		□ No орр	portunity to observe		
3	Is open-minded, able and willing to examine his/her own beliefs and values. Low High or Uncertain		□ No орр	portunity to observe		
4	Is aware of the impact of his/her actions and words on others. Low High or Uncertain		☐ No opp	portunity to observe		
5	Able to make decisions and to carry out plans without immediate support on others. Low High or Uncertain		☐ No opp	portunity to observe		
6	Is able to function well under pressure. Low		☐ No opp	portunity to observe		
7	Demonstrates capacity for engaging with diverse individuals, groups or communities. Low		☐ No opp	portunity to observe		
Affirmation and Recommendation (please tick one box to indicate your overall recommendation) I confirm that the information set out in this Referee Report is true and correct to the best of my knowledge, and I consent to the information supplied being used for selection processes for entry to the University of Auckland. I understand that I may be contacted personally concerning information supplied in this report. Highly Recommended Recommended Not Recommended I would prefer to be contacted to discuss the applicant						
	or add initials if and and an amount of the state of the	Date:				
	ank you for agreeing to be a referee for this applicant, and for providing us with this infor otly to the University of Auckland by emailing it to admission@auckland.ac.nz	rmation.	. Please send back	this completed form		