

Department name:

Referee Report - 2

PROGRAMME:

Supporting documentation to be supplied

Applicant's full name

Address

Date of birth

The above details are to be completed by the applicant.

Please see notes over page before completing this form.

Please score the applicant from 5 (high) down to 1 (low) to indicate your assessment of the applicant in relation to each of the qualities.

Personal qualities

| | 5 | 4 | 3 | 2 | 1 | |
|------------------------|---|---|---|---|---|-----------------------|
| Honest | | | | | | Dishonest |
| Mature | | | | | | Immature |
| Reliable | | | | | | Unreliable |
| Well groomed | | | | | | Untidy |
| Tolerant | | | | | | Intolerant |
| Accepts responsibility | | | | | | Avoids responsibility |

Interpersonal relationships

| | | |
|--|------------------------|---------------------------|
| Relationships with peers | Friendly, supportive | Domineering or withdrawn |
| Relationships with people with authority | Open, constructive | Tense, defensive |
| Consideration for others | Accepting, considerate | Self centred, judgemental |
| Communication skills with others | Effective, clear | Vague, inconsistent |

Attitudes to work/study

| | | |
|---------------------------|--------------------------------------|----------------------|
| Perseverance | Appropriately persistent | Easily distracted |
| Cooperation with others | Participative | Isolated |
| Application to work/study | Excellent | Poor |
| Acceptance of correction | Accepting questions appropriately | Resistant, defensive |
| Initiative | Motivated, appropriately independent | Awaits direction |
| Information seeking | Enquiring | Uninterested |



General

Please add any general comment about the applicant's performance at work/school.

Is attendance pattern acceptable? Yes No If NO, comment

Do you consider the applicant able to undertake a full time programme of intensive study and/or a significant clinical component if applicable? Yes No Comments

Please indicate any factors which you think could interfere with this applicant's ability to undertake or complete this programme

Ara may initiate further contact with referees as per the requirements of the Children's Act (2014).

Do you believe this candidate is suitable for a position working with children and/or vulnerable adults? Would you trust them in a role of responsibility for children? Yes No If NO, why not?

Is the information in this "Report on Applicant" to be kept confidential from the applicant? Yes No

Signature

Date

Name

Relationship to applicant:
(eg employer, teacher etc)

For school principals (if applicable)

Recommend this applicant

Recommend with reservation

Not recommended

Signed:

Notes

The information and opinion provided in this report constitute "personal information" in terms of the Privacy Act 1993. The person about whom this information and opinion are provided (the applicant) is entitled to have access to this report under IPP6 and to seek correction of this report under IPP7. Information or opinion provided in this report may be disclosed under IPP11 to the applicant and members of the Selection Committee.

PLEASE RETURN THIS FORM, AFTER COMPLETION, TO THE APPLICANT WHO IS RESPONSIBLE FOR ITS RETURN TO ENROLMENTS AT ARA INSTITUTE OF CANTERBURY LTD (UNLESS IT IS TO BE KEPT CONFIDENTIAL) OR HANDED IN WITH THEIR APPLICATION.