

Professional Referee Report



The person completing this Referee Report must not be a relative or family member, and have known the applicant for at least 6 months.

Thank you for agreeing to complete this Referee Report. This Referee Report asks for you to comment on questions relating to the applicant's suitability to undertake a health and wellbeing program. We would appreciate your honesty to enable the Selection Panel to accurately assess the applicant. All comments will be treated confidentially.

Name of applicant:

Name of referee:

Home address of referee:

Contact numbers of referee:

Home:

Work:

Mobile:

I am confident I know the applicant well enough to complete this report. Yes No

If no, please return the form to New Zealand Tertiary College at the address noted on the reverse of this form.

1. Please indicate the length of time you have known the applicant:

2. Describe the capacity in which you have known the applicant:
(eg. Employer, minister, kaumatua, colleague etc).

3. Describe your knowledge of the applicant's academic ability / performance:

4. Describe and provide examples of the applicant's most significant personal qualities. Examples should demonstrate each quality identified.

5. Describe the applicant's degree of involvement in activities such as spiritual, cultural, sporting, community and family pursuits. Comment on level of expertise reached and inter-personal relationships.

6. New Zealand Tertiary College believes that those fit to work in a healthcare setting should demonstrate the following qualities: professionalism, compassion, respect for others, sensitivity and commitment.

Please list circumstances where you have observed the applicant demonstrate the personal qualities required to work in a healthcare setting.

7. Describe the applicant’s awareness of, and commitment to social issues. Eg. Understanding and tolerance of different cultures, values and beliefs.

8. Do you consider the applicant has the stamina and health to work in a healthcare setting? Yes No

9. Are there any special circumstances the Selection Panel needs to be aware of before selecting this applicant for a career in health and wellbeing?

10. Recommendation: *(Please tick one)*

- I recommend this applicant without reservation as an excellent prospect to commence a health and wellbeing program of study.
- I have concerns, but believe with work and commitment this applicant could succeed.
- I think this applicant is unsuitable work in a healthcare setting.

11. Additional comments:

12. I am happy to be contacted for additional information and clarification if necessary. Yes No

13. Do you consent to NZTC sharing the information you have provided with the applicant? Yes No

Referee signature:

Date:

Should you have any queries, please phone NZTC on (Auckland) +64 9 520 4000 or (Christchurch) +64 3 366 8000

Please return via: **Scan and eMail: enrolments@nztertiarycollege.ac.nz**

Fax: 09 520 4020

or post to:

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New Zealand Tertiary College
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Greenlane, Auckland 1546

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