EMPLOYER RECOMMENDATION

For Postgraduate Courses at the Curtin Perth City Campus

If you are using an Apple computer,
Tablet or smart phone, you must download
and complete this form using <u>Adobe Reader.</u>

You have been chosen by the applicant as a person who is working with him/her in a supervisory capacity. The object of this recommendation is to assist in the selection of the most suitable candidate for a Postgraduate Degree. You are therefore requested to give your view as to the support the applicant would receive in undertaking this program.

IAPPLICANT TO COMPLETE:] NAME OF APPLICANT: STUDENT ID: COURSE NAME: NAME OF REFEREE: NAME OF BUSINESS: BUSINESS ADRESS: SUBURB/TOWN: COUNTRY: POSTCODE: E-MAIL: PHONE:

[EMPLOYER TO COMPLETE:]

In what capacity have you worked with the applicant?

Recommendation of the Employer with respect to the Applicant's managerial/leadership potential and capacity to undertake postgraduate studies:					
How would you r	ate their current	potential as a lead	der?		
□Outstanding Top 1 - 5%	□Very Good Top 6 – 15%	□Good Top 25%	□Fairly Good	□Acceptable	□Poor
Your support for	recommendation	n:			
		didate's leadership el of performance i		nt to higher studies	and personal
□High	□Good	□Fairly Good	□Acceptable	□Poor	
Signature of Referee:				Date:	
Please return this report to the applicant for submission with their online application.					