Name of Applicant: ____________________________
Surname: ____________________________
Given Names: ____________________________

who is applying for admission to study for the degree of ____________________________
in the Department (or School or Faculty or graduate programme) of ____________________________
with special field of interest in ____________________________

To the Referee:
(A letter of reference may be submitted in lieu of this form.)

In what capacity, how well, and how long have you known the applicant? ____________________________________________

______________________________________________________________________________________________

Does your university offer the graduate degree programme this applicant seeks? □ Yes □ No

If yes, does the applicant meet the minimum admission requirements for acceptance to this programme at your university?
□ Yes □ No (give reasons) ____________________________________________

______________________________________________________________________________________________

If this applicant took a course(s) from you, what was his/her rank in the class? (i.e. 3rd out of 20 students, enter “3/20”)

<table>
<thead>
<tr>
<th>Course Name</th>
<th>Course Number</th>
<th>Rank in Class</th>
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Please rank the applicant as follows: 0=Poor, 1=Fair, 3=Very Good, 4=Excellent, 5=Outstanding

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<thead>
<tr>
<th></th>
<th>Rank</th>
<th>Remarks</th>
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<tbody>
<tr>
<td>Academic Preparation</td>
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<td>Originality</td>
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<td>Skill at Research</td>
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<td>Industry</td>
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<td>Intellectual Capacity</td>
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<td>Teaching Ability (if known)</td>
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<tr>
<td>All-round Ability</td>
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Revised December, 2004

(Over)
Please comment on the applicant’s academic strengths and potential for completing a graduate programme.

For students whose native language is not English, please indicate if the applicant has sufficient competence in English to:

a. understand lectures conducted in English
b. read widely in English
c. express herself/himself in written English

Referee’s Institution and Address

Name of Referee (Print or Type)

Phone: ____________________________
Fax: ____________________________
E-mail: ____________________________

Signature: ____________________________
Date: ____________________________

PLEASE SEND ALL REFERENCES TO:

Yvette Kharoubeh, Senior Program Assistant, MED3
Professional Development & Community Engagement
Faculty of Education,
The University of British Columbia
2125 Main Mall (Room 1304)
Vancouver, BC, CANADA V6T 1Z4

This Confidential Report must be both prepared by and signed by the referee named above. Evidence to the contrary will lead to the cancellation of any offer of admission (whether or not accepted), or withdrawal of the student from the University. It is the policy of the University to treat as confidential letters of reference which it receives. It can, however, be required under Freedom of Information legislation to disclose the substance of any letter of reference but only where that can be done without disclosing the identity of the writer.