

CPRR

Please complete and email directly to: intapplication@latrobe.edu.au

Section 1: (to be completed **by the applicant** before forwarding this form to two **PROFESSIONAL** referees familiar with your work in psychology or related field)

Applicant Family name	
Other names	
Indicate degree applying for	<input type="checkbox"/> Master of Clinical Psychology <input type="checkbox"/> Master of Clinical Neuropsychology

INFORMATION FOR PROFESSIONAL REFEREES

The Master of Psychology coursework degrees are professional postgraduate programs which involve completing a research thesis as well as professional coursework, casework and practica. It is essential that professional referees provide candid information regarding the candidate's suitability for each of these components of the course. If you do not believe that you can give a completely candid report, please advise the applicant that you are unable to complete the report. Thank you for your help.

Section 2: to be completed by the **PROFESSIONAL** referee and forwarded directly to La Trobe University

DO NOT RETURN TO THE APPLICANT: (Please print)

1. How long and in what capacity have you known the applicant?

Length of time

Capacity

2. How well do you know the applicant?

☐ extremely well ☐ very well ☐ fairly well ☐ not very well

3. Please comment on the applicant's interpersonal skills.

4. Please describe the applicant's major strengths.

5. Please describe the applicant's major weakness.

6. How well is the applicant able to meet deadlines?

☐ extremely well ☐ very well ☐ fairly well ☐ not very well

7. How does the applicant handle criticism and corrective feedback?

☐ extremely well ☐ very well ☐ fairly well ☐ not very well

8. How well do you rate the applicant's ability to speak publicly?

☐ extremely well ☐ very well ☐ fairly well ☐ not very well

9. How organised and structured is the applicant's thinking and writing?

☐ outstanding ☐ excellent ☐ good ☐ fair ☐ poor

10. Does the applicant show good listening and empathy skills?

☐ All of the time ☐ Most of the time ☐ Some of the time

☐ Hardly ever ☐ Not at all

11. Overall, how strongly do you support the applicant for a professional psychology course in which clinical skills are needed.?

☐ unreserved ☐ very strong ☐ strong ☐ reserved

☐ Not at all

12. Are there any other comments you would like to make?
(Please attach a separate sheet if necessary.)

Referee's Name

Position

Institution/Employer and address

Email

Telephone

Signature

Date [Click here to enter a date.](#)

Please return directly to: **La Trobe International, La Trobe University Melbourne Campus, Victoria 3086, AUSTRALIA**

Fax: +61 3 9479 3660 or **Email: intapplication@latrobe.edu.au**

CRICOS provider number: [00115M](#)