**Confidential Referee Report**

For admission into an Australian Psychology Accreditation Council accredited Professional Masters Program. All referees report are treated in strictest confidence in accordance with Commonwealth and State privacy and freedom of information laws.

**Instructions for completing this form**

Applicants: Please fill in applicant details section of this form and then send it to your referees via email. Referee: Please complete this form and email it to pgpsycselection@latrobe.edu.au. This form is confidential and must not be shared with the applicant.

**Applicant Details**

|  |  |
| --- | --- |
| **Applicant ID:** | **Date of Birth** |
| **Family Name:** | **Given Name(s):** |
| **Email address:** | **Contact Phone:** |

**Referee Details**

|  |  |
| --- | --- |
| **Referee Name:** | **Referee Position:** |
| **Email address:** | **Contact Phone:** |
| **University:** | **Institution:** |
| **Relationship to applicant:** | **How long have you known the applicant?** |
| **Rate your knowledge of the applicant (Minimal, Low, Medium, High)** |
| **Based on your knowledge of the applicant, please indicate the level of your support for their application? (Minimal, Low, Medium, High)** |

**Please rate the following based on your knowledge of the applicant (Minimal, Low, Medium, High)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Academic ability** |  | **Initiative and motivation** |  |
| **Research ability** |  | **Ability to work as part of a team** |  |
| **Writing ability** |  | **Maturity and stability** |  |
| **Oral ability** |  | **Ability to accept feedback** |  |
| **Interpersonal skills** |  | **Ability to work under stress** |  |
| **Ability to work independently** |  |  |  |
| **Suitability for professional training in psychology (Poor, Low, Medium, High)** |
| **Suitability for client/professional work (Poor, Low, Medium, High)** |
| **What are the applicant’s major strengths?** |
| **What, if any are the applicant’s weaknesses?** |

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