



**CONFIDENTIAL (not to be returned to the applicant)**

<b>Section A (To be completed by the applicant)</b>	
Please complete Section A of this form and send it to your academic referee for completion of Section B. Your referee should be an academic conversant with your most recent studies.	
Surname: _____	First Name: _____
Postal Address: _____	
Telephone: _____	Email: _____
Proposed Course (eg. MPhil, PhD): _____	
Research Area: _____	

<b>Section B (To be completed by the referee):</b> Please provide a confidential assessment of the applicant.
Title: _____ Name: _____
Position: _____
Name of Institution and country (if not Australia): _____
Telephone: _____ Email: _____
1. Applicant's actual or predicted final examination results (if known). Indicate whether actual or predicted (eg. Hons 1 actual): _____
2. If the applicant is currently enrolled in an Honours degree, what level of honours is he/she likely to obtain? _____
3. Based on the quality of completed work, the applicant is seen as having a record which is (please tick/specify): <input type="checkbox"/> Top 5% <input type="checkbox"/> Top 10% <input type="checkbox"/> Top 15% <input type="checkbox"/> Top 20% <input type="checkbox"/> Other (please specify): _____
4. Based on the applicant's overall academic performance and potential for the proposed course, the degree of support I give the applicant is (please tick): <input type="checkbox"/> Unreserved <input type="checkbox"/> Strong <input type="checkbox"/> Fairly Strong <input type="checkbox"/> Moderate <input type="checkbox"/> Nil
5. Additional Comments ( <i>Please attach on additional page if necessary</i> ):     
Signature of referee: _____ Date: _____

**Do not return the report to the applicant. Please send this report by email, post or fax directly to:  
Student Administration Centre, Faculty of Architecture, Design and Planning.**