Whitireia NEW ZEALAND

Health & Social Services Referee Report

Thank you for taking the time to complete this form. This report will remain confidential to members of the selection committee only if it is completed by the referee nominated by the applicant. The offer of confidentiality cannot be extended to any other party, even if submitted in good faith.

1. Applicant Details

APPLICANT TO COMPLETE THIS SECTION ONLY

Applicant's surname:

Applicant's first name/s:

Which programme/s have you applied for?

Date of birth:

Day Month Year

2. Referee Details

REFEREE TO COMPLETE ALL FOLLOWING SECTIONS

Thank you for acting as referee for the above-named applicant. Please **do not** complete this form if you are a relative, flatmate or close friend of the applicant.

This report will form part of the evidence used to help us assess the applicant's suitability for their proposed programme of study. Please be open and honest in your response. Aspects of this report may be discussed with the applicant. You do not need to answer any question if you feel uncomfortable answering, or are unable to answer, that particular question.

Please return this report to the applicant; or mail to Enrolments, Whitireia New Zealand, DX Box: SX33459, Porirua 5022; or email to: enrolments@whitireia.ac.nz Please note applications can not proceed without referee reports.

Referee's name:

How long have you known the applicant?

Relationship to the applicant?

Are you willing to be contacted by phone for further discussion? Yes No

Telephone:

PLEASE INDICATE YOUR ASSESSMENT OF THE APPLICANT IN RELATION TO EACH OF THE QUALITIES.

3. Personal Qualities

Honest	○○○○	Dishonest
Mature	○○○○	Immature
Reliable	○○○○	Unreliable
Tolerant	○○○○	Intolerant
Accepts responsibility	○○○○	Avoids responsibility

Comments:

4. Interpersonal Relationships

RELATIONSHIP WITH PEERS

Friendly, supportive	○○○○	Domineering

RELATIONSHIP WITH PEOPLE WITH AUTHORITY

Open, constructive	○○○○	Tense

CONSIDERATION FOR OTHERS

Accepting, considerate	○○○○	Judgemental, inconsiderate

UNDERSTANDING OF EQUITY ISSUES

Excellent	○○○○	Poor

Comments:

5. Communication Skills

LISTENING SKILLS

Excellent ○○○○ Poor

WRITTEN COMMUNICATION

Excellent ○○○○ Poor

ORAL COMMUNICATION

Excellent ○○○○ Poor

CROSS-CULTURAL COMMUNICATION

Excellent ○○○○ Poor

Comments:

6. Attitudes to work/study

PERSEVERANCE

Appropriately persistent ○○○○ Easily distracted

COOPERATION WITH OTHERS

Participative ○○○○ Isolated

ACCEPTANCE OF CORRECTION

Accepting of questions ○○○○ Resistant, defensive

INITIATIVE

Motivated, independent ○○○○ Awaits direction

ABILITY TO SEEK ASSISTANCE

Excellent ○○○○ Poor

ABILITY TO COPE WITH STRESS AND PRESSURE

Excellent ○○○○ Poor

Comments:

7. General

Has the applicant's health ever affected their performance at work/school? ☐ Yes ☐ No

Does the applicant have any special abilities or disabilities? ☐ Yes ☐ No

Is their attendance pattern at work/school acceptable? ☐ Yes ☐ No

Comments:

8. Safety Check*

Do you have any concerns about the applicant's suitability to work with children? ☐ Yes ☐ No

Would you be happy for the applicant to take care of your children? ☐ Yes ☐ No

Comments:

***Safety Check: The Children's Act (2014) requires all students, who may work with children during the course of their study, to be safety checked. Safety checking includes: reference checking, review of work history, identity check, police vet and an overall assessment of the applicant's safety to work with children.**

9. Overall Recommendation

Please indicate your overall recommendation by ticking a box below:

☐ Recommended ☐ Recommend with reservation

☐ Not recommended

If recommended with reservation or not recommended please comment:

Signature

Date

Day Month Year