

INSTITUTE OF RURAL DEVELOPMENT PLANNING



ACADEMIC REFEREE REPORT

SECTION 1: TO BE FILLED BY THE APPLICANT	
After filling out this section, please give this form to one of your referees.	
Name of Applicant (Please underline surname or family name)	
Programme applied for:	Academic Year

SECTION 2: TO BE COMPLETED BY THE REFEREE									
The above named is applying for admission to the Institute of Rural Development Planning to pursue Masters programme The candidate has named you as one of his/her referee. We will appreciate receiving a confidential report from you on the applicant. Please elaborate on a separate sheet if necessary									
Name of the Referee	Designation								
Name & Address of Institution/Organization	Tel. No. Mobile Phone No.	Email Address							
(1) How long have you known the applicant and in what capacity?									
(2) If you have known the applicant as an employee/subordinate, how would you rate the applicant among other employees/subordinates at a similar level whom you have known in recent years? (Please tick one of the following boxes:									
Excellent`	<input type="checkbox"/>	Very Good	<input type="checkbox"/>	Good	<input type="checkbox"/>	Average	<input type="checkbox"/>	Poor	<input type="checkbox"/>
(3) If you have known the applicant as your student, how would you rate him/her among the best students (in %) (Please tick one of the boxes) :									
5%	<input type="checkbox"/>	10%	<input type="checkbox"/>	20%	<input type="checkbox"/>	30%	<input type="checkbox"/>	No assessment possible	<input type="checkbox"/>

(4) Please indicate with a tick your rating of the applicant in the following categories:					
	Excellent	Very Good	Good	Average	Poor
Academic ability					
Analytical ability					
Motivation for postgraduate studies					
Maturity/Ability to work with others					

(5) Please comment on the applicant's academic strengths and ability to pursue Masters programmes (Please use a separate sheet if applicable)

(6) Do you recommend the applicant for the above-mentioned Masters Programmes? (Please tick one of the boxes)

Strongly recommended

Recommended with some reservation

Recommended

Do not recommend

Signature

Date

Mailing Instruction

Please return the completed form in a **sealed envelope** to the applicant or send it directly to the address below. Print "Attention to: Deputy Rector Academics (Masters Programmes)" at the centre of the envelope

The Rector
Institute of Rural Development Planning
P.O. Box 138
Dodoma