Referee Report

Candidate’s Name:
Candidate’s ID:

Personal Particulars

Name:

Designation:

School/Organisation/Company:

Evaluation

1. How long have you known <candidate’s name>?

2. Briefly explain your relationship and experiences with <candidate’s name> (in what capacity, and what have you directly observed about <candidate’s name> behaviour).

3. What are the first words that come to mind to best describe <candidate’s name> character?

4. What would you say are <candidate’s name> weaknesses?
5. Based on your knowledge of <candidate’s name>, please comment on the following attributes:

a) Reliability and commitment:

b) Teamwork:

c) Communication skills:

d) Service orientation:

e) Resilience and adaptability:

6. How may <candidate’s name> contribute to a medical community training to care for patients in a culturally and economically diverse society, given <candidate’s name> background and experiences?

7. Would you want <candidate’s name> to look after your loved ones? Yes/No, please elaborate.

By clicking “Agree”, I hereby certify that I have completed the referee recommendation and have given information that is true to the best of my knowledge.

 Agree

Submit