Reference Form

### Confidential

This form is to be used as part of the application process for the BSc (Hons) Habilitation Work (Visual Impairment) course.

Applicants should provide electronic copies of this form to 2 referees.

Please use a word processor to type your answers into this form in the spaces provided. The spaces will expand to accommodate longer answers. See the end of the form for full submission instructions.

**The application cannot be processed until two references have been completed in full and submitted to Birmingham City University.**

**Applicant Full Name:**

**Referee Full Name:**

**Date reference submitted:**

References should be from current and / or previous employers, academic tutors, volunteer supervisors and / or other relevant professionals. At least one reference should be from someone who has recent experience of working with the applicant. Preferably, references should not both be obtained from the same organisation.

If an employer is sponsoring the application, the employer must provide one of the references.

# To be completed by Referee

The above named person is applying for admission to the BSc/BSc (Hons) Habilitation Work - Working with Children and Young People course at Birmingham City University.

The University would appreciate your personal impressions of their intellectual ability and professional skills. To assist us to ascertain their suitability for this particular course, we also seek your comments on their character, quality of previous work, personal strengths and weaknesses, and potential.

Referee name:

Position:

Address:

Post Code:

Email:

Telephone:

**Please tell us how long have you known the applicant, and in what capacity?**

### Suitability for this course

In considering the applicant’s personal circumstances, Referees should consider carefully whether they are aware of any factors which would impede their ability to achieve this course.

* **Please comment on the applicant's general suitability for the course with particular reference to his / her potential strengths for working with children and young people.**
* **Please rate the applicant’s qualities in the following areas by writing a number against each aspect, based on this scoring:**

4 = Excellent / 3 = Very Good / 2 = Average / 1= Below Average /  
n/k = Not Known

Motivation:

Ambition & drive:

Originality & creativity:

Problem solving skills:

Decision making skills:

Time management skills:

Oral communication skills:

Written communication skills:

Word-processing & email skills:

Online/Internet use:

Numeracy:

Personal maturity:

# Overall recommendation

**Please type YES against ONE of the following to indicate your overall recommendations for this applicant:**

* I unreservedly support the candidate’s application to pursue this course.
* I can offer support for the candidate’s application to pursue the course, but have some reservations, or do not know the applicant well enough to do so unreservedly. *(Use “Any other comments” below if you have anything to add).*
* I cannot support the candidate’s application to pursue this course.

**You must choose one of the above options for this reference to be valid.** If you are unable to unreservedly support this application we would appreciate your comments below:

**Name of referee:**

**Date:**

*Typing your name above into this electronic form will be treated as equivalent to a inserting a handwritten signature.*

**Thank you for taking the time to provide this information.**

# How to submit this form

Send your reference form as an email attachment to:

[alliedhealth.admissions@bcu.ac.uk](mailto:alliedhealth.admissions@bcu.ac.uk)

Please Cc this reference to:

[rehabadmissionsquery@bcu.ac.uk](mailto:rehabadmissionsquery@bcu.ac.uk)

Please ensure you insert:

‘**BSc Habilitation Work reference’** in the subject field of the covering email.

If you have any queries, or cannot email the form please contact:

Health Admissions Department on 0121 331 5500

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