

REFEREE REPORT

MASTER OF EARLY CHILDHOOD

APPLICANT'S FULL NAME

The person named above has applied for admission to the Master of Early Childhood at Macquarie University and has nominated you as a referee.

Our programs provide applicants with the opportunity to develop knowledge, abilities, attitudes and understandings at an advanced level and thereby enhance their professional capabilities to work in senior roles in a variety of early childhood settings. It would assist the University if you would give your assessment of the applicant's capacity to engage in postgraduate studies in early childhood. The questions posed below suggest the kind of information the University finds useful, and this form is provided for your convenience.

YOUR CONTACT INFORMATION

TOOK CONTACT IN ORMATION	
First Name	Last Name
E-mail Address	Phone
Name of Organisation	Position Held
How long have you known the applicant?	
In what connection have you know the applicant?	
Please describe your knowledge of the applicant' 8 years) and their families.	s experiences with young children (birth to
What are the applicant's outstanding strengths?	

In what areas r	elevant to early	childhood	education	do you fe	eel that the	applicant	needs to
develop?				-			

Do you have any reservations about the applicant undertaking a demanding postgraduate studies program in respect to their: a) aptitude for study, b) motivation, and c) time commitments.

Please rate the applicant on the following characteristics (tick the appropriate box for each)

	Excellent	Very Good	Good	Poor	Unknown
Drive to succeed					
Self confidence					
Interpersonal skills					
Writing skills					
Decision-making					
Ability to influence					

Any other comments of relevance to this application for further studies:

Please send your report directly by email to mi.admissions@mq.edu.au.