

ACADEMIC REFEREE'S REPORT – CLINICAL RESIDENCY PROGRAM
For applicants for Master of Veterinary Studies/Master of Veterinary Clinical Studies

The Sydney School of Veterinary Science would like to take this opportunity to thank you for your report. If you have any questions, please do not hesitate to contact our office on (02) 9351 8783

Section A (To be completed by the applicant)	
Please complete Section A of this form and send it to your academic referee for completion of Section B. Your referee should be conversant with your recent veterinary activities/career.	
Surname:	Other Names:
Address:	Telephone:
Email:	
Details of Referee	
Title:	Name:
Position:	Work address:
Telephone:	Email:
Section B (To be completed by the referee): Please provide a confidential assessment of the applicant.	
Based on the quality of the applicant's veterinary achievements relative to opportunity, I rate the applicant in comparison to other veterinary professionals as (please tick): top 5% <input type="checkbox"/> top 10% <input type="checkbox"/> top 15% <input type="checkbox"/> top 20% <input type="checkbox"/> Other (please specify) : _____	
Based on the applicant's overall professional performance, research potential and suitability to undertake research studies, the degree of support I give the applicant is (please tick): Unreserved <input type="checkbox"/> Strong <input type="checkbox"/> Fairly Strong <input type="checkbox"/> Moderate <input type="checkbox"/> Nil <input type="checkbox"/>	
Additional Comments (Please attach an additional page if necessary):	
Signature of Referee:	Date:
Do not return the report to the applicant. Please send this report <i>before the closing date (as advised by applicant)</i> by a) post to Education Support Unit, Sydney School of Veterinary Science, JD Stewart Building B01, The University of Sydney, NSW 2006. OR b) emailing a PDF file of the original signed report to vetsci.education@sydney.edu.au.	