

University of Jaffna
Faculty of Graduate Studies

FORM 1.1

Referee Report Form

SECTION 'A' (To be completed by the Candidate)

Applicant's name (IN BLOCK CAPITALS) _____

Proposed Programme of Study _____

Signature _____ Date _____

(This portion should be signed by applicant before handing over to the referee)

SECTION 'B' (To be completed by the Referee)

Name

Position

Address

Email ID

Contact Number

Please evaluate the applicant by placing a tick (✓) after each characteristic that most represents your opinion.

	Below Average	Average	Good	Very Good	Inadequate Opportunity to Observe
a. Ability to Research work					
b. If the medium of research is English					
b.1. Ability in oral expression in English					
b.2. Ability in written expression in English					
If the medium of research is Tamil					
b.1. Ability in oral expression in Tamil					
b.2. Ability in written expression in Tamil					
c. Intellectual capacity					
d. Emotional stability and maturity					
e. Self-reliance and independence					

Please enclose the confidential report in the envelope, addressed to Dean, Faculty of Graduate Studies, University of Jaffna and sign after sealing it. The signed envelop could be handed over to the applicant in order to submit with his/her application.

Signature

Date