



SCHOOL OF TECHNOLOGY

**Post-Graduate Diploma in Management Information Systems (PG. Dip. MIS)  
Programme  
Referee Report Form**

**I. This section is to be completed by the applicant**

After filling out this section, please give this form to one of your referees.

Applicant's Name

Applicant's Address

City/Country

Programme of Study

Date of Birth

Telephone Number :

Fax Number:

Email

*I hereby authorize the appropriate person(s) to provide the information requested in this document.*

Applicant's Signature

Date

**II. This section is to be completed by the referee**

GIMPA would appreciate your assessment of the applicant's qualities. The Institute will use your appraisal only in the evaluation of the participant's admission and its confidentiality will be safeguarded.

**Please complete this form as soon as possible. Seal it in an envelope, sign across the seal to ensure confidentiality and return to the applicant.**

**1. General Rating**

Please indicate your opinion of this applicant in the context in which you know him or her:

Your assessment should be indicated in each case by ticking of the appropriate check box:

**1.1 In your view, how does the applicant rate on the following personal characteristics?**

**Motivation**

Very High  High  Above Average  Average  Below Average  Low  Very Low  Not Known

**Self Discipline**

Very High  High  Above Average  Average  Below Average  Low  Very Low  Not Known

**Leadership**

Very High  High  Above Average  Average  Below Average  Low  Very Low  Not Known

**Self-Confidence**

Very High  High  Above Average  Average  Below Average  Low  Very Low  Not Known

**Maturity**

Very High  High  Above Average  Average  Below Average  Low  Very Low  Not Known

**Academic Ability**

Very High  High  Above Average  Average  Below Average  Low  Very Low  Not Known

1.2 Please indicate how well the applicant is known to you:

- Known only through Records       Seen occasionally       Known personally

1.3 Please indicate how long you have known the applicant:

- Less than 1 year       1-3 Years       More than 3 years

1.4 The applicant has been known to you as a:

- Student       Subordinate       Colleague       Friend       Acquaintance

2. **Specific Comments**

2.1 What do you see as the personal strengths of the applicant?

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2.2 In your view, what weakness might the applicant show?

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2.3 GIMPA would appreciate your overall assessment of the applicant's academic capabilities:

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3. **The Referee:**

Referee's Name

Organisation

Position

Address

Region/City/Country

Contact Phone Number:

Fax Number

Referee's Signature

Date

E-mail:

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