**UNIVERSITY OF THE WITWATERSRAND**

# DEPARTMENT OF FAMILY MEDICINE AND PRIMARY CARE

# SCHOOL OF CLINICAL MEDICINE

# BHSc HONOURS IN HEALTH SYSTEMS SCIENCE REFEREE’S REPORT

In order to assess applicants who apply for Postgraduate Courses we require recommendations from two referees of the applicant’s choice.

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| **APPLICANT DETAILS** | |
| **Applicant’s name** |  |
| **Date of Birth** |  |

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| --- | --- |
| **REFEREE DETAILS** | |
| **Name** |  |
| **Physical Address** |  |
| **Telephone (s)** |  |
| **Email** |  |
| **Title** |  |
| **Position** |  |
| **Relationship to applicant** |  |
| **Number of years that you have known the applicant** |  |
| **Signature** |  |
| **Official Stamp** |  |

Please comment where possible on:

1. The applicant’s academic ability to successfully complete the above-mentioned programme.
2. The relevance of the programme to the applicant’s present or future work.
3. The applicant’s linguistic (English) and numeracy skills (including familiarity with statistical or qualitative data analysis packages).
4. The applicant's ability to do research

***The report is not confidential. Please return to the applicant who should upload it on Wits Online Self services.***