UNIVERSITY OF THE WITWATERSRAND

# SCHOOL OF PUBLIC HEALTH

# POSTGRADUATE COURSES: REFEREE’S REPORT: 2020

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** | |  |
| **Postgraduate course being applied for** | |  |
| * Master of Science in Medicine, field of Exposure Science | |  |
| **REFEREE DETAILS** | | |
| **Name** |  | |
| **Physical Address** |  | |
| **Telephone (s)** |  | |
| **Fax** |  | |
| **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 abovementioned programme.
2. The relevance of the course to the applicant’s present or future work.
3. The applicant’s linguistic (English) and numeracy skills (including familiarity with statistical packages).
4. The applicant’s research experience and competency.

**The report is no longer confidential. Please return to the applicant who should upload it on Wits Online Self services.**

### <https://self-service.wits.ac.za/>

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### [Student Self Service - Wits University](https://self-service.wits.ac.za/)