



Open Reference Form 2008-09

Office use only APP. DATE _____ APP. NUMBER _____

To the Student

After you complete the information below, give this form to your referee. Your referee can be any person who has taught you or with whom you have worked for a period of at least 2 years. The reference of a relative is considered invalid. This form should be mailed to the Srishti office with the completed application form.

Name _____
first middle last

Address _____

To the Referee

Thank you for agreeing to provide a referral for the applicant. Please complete this form in its entirety.

Name of the referee _____ Occupation _____

How many years have you known the applicant? _____

In what context (s) have you known the applicant? _____

Address of the referee _____

Tel No. _____ Email _____

RATING	Below average	Average	Good	Very Good	Excellent	No basis of judgment
Social adaptability						
Emotional adaptability						
Leadership						
Motivation						
Disciplined work habits						
Integrity and honesty						
Academic ability						
Willingness to go beyond the expected						

Signature _____ **Date** _____

