

#### **Department of Human Communication Sciences**

# REFERENCE FORM FOR ADVANCED CERTIFICATE IN LANGUAGE AND COMMUNICATION IMPAIRMENT IN CHILDREN

## **CONFIDENTIAL**

Section 1 of this form should be completed by the applicant. The form should then be passed to the referee who is asked to complete the remainder of the form, and return it in a signed, sealed envelope either to the applicant for return with the application form, or to mail it directly to the address provided below.

Return Address:
Admissions Secretary
Department of Human Communication Sciences
University of Sheffield
362 Mushroom Lane
Sheffield, S10 2TS
United Kingdom

#### Section 1: To be completed by the applicant

#### **Applicant's Details**

Please complete the following details (in block capitals), and then copy the form to each referee for completion.

1 Surname / Family Name		2 Title Mrs/Ms/Miss/Mr
3 Forename(s)		4 Date of Birth
5 Sex Male / Female	6 Marital Status Married / Single	7 Nationality

### Section 2: To be completed by the Referee

The above-named candidate is applying for graduate study at the University of Sheffield and has named you as a referee. We should be grateful if you could provide us with a reference on the academic and general suitability of the applicant to undertake the proposed course of study, either by completing the form overleaf, or by submitting a letter of reference. Should you choose to submit a letter, please use headed paper and attach it to this form. (If you require details of the course, please visit: <a href="www.sheffield.ac.uk/hcs">www.sheffield.ac.uk/hcs</a> and follow the undergraduate course links to the Advanced Certificate in Language and Communication Impairment in Children.)

Please complete this form as soon as possible, and return it in a sealed envelope, endorsed with your signature over the seal, either to the applicant for return with the application form or **directly to the Department at the return address above**. Thank you for your assistance, and please be assured that your reply will be treated in confidence by the Department.

When completing this form we request that you give your personal opinion of the candidate's ability to complete studies at Undergraduate level (Advanced Certificate). In particular we would seek comments relating to the candidate's commitment to training and development courses, as well as any distinct strengths and weaknesses (e.g. motivation, commitment, independence, ability to work under sustained pressure). Where the applicant's first language is not English, we would request your opinion on his/her standard of proficiency in written and oral English. This programme is a Distance Learning course; please comment on the applicant's ability to undertake this workload in addition to their normal occupation.

Applicant's name:	
Signed	
Name: Title:	Telephone No: E-mail:
Affiliation:	Length of time known:

Please provide an official stamp of your School, College or Organization.