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**REFEREE’S REPORT**

***Confidential Reference for an Applicant for admission to study a Research Degree course with the Panorama NERC DTP.***

Please note, the Applicant must complete **Section A** before forwarding the report to the Referee. The Referee should then complete and endorse **Section B** with a signature/stamp (where possible) and **return the reference by email to: NERCDTP@leeds.ac.uk.**

**Section A** – to be completed by the Applicant **Section B** – to be completed by the Referee

**Applicant Details Referee Details**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Family Name |  |  | Family Name |  |
| Other Name(s) |  |  | Other Name(s) |  |
| Title |  |  | Title |  |
| Programme of Study applied for | PhD |  | How long have you known the Applicant? |  |
| School/Department applied to | Panorama NERC DTP |  | In what capacity do you know the Applicant? |  |
|  |  |  | If this is an academic reference, please state the academic institution in which you are/were employed |  |
|  |  |  | E-mail/telephone number |  |

The Applicant named above has applied to study at the University of Leeds and has named you as a Referee. We would be most grateful if you could let us know confidentially whether in your opinion the Applicant possesses the necessary academic and personal qualities to undertake such a course.

In addition, it would be helpful if you could provide us with the following information, in as far as you are able:

* The standard, actual or anticipated, of the applicant’s current/previous academic work
* Your opinion and expectations of the applicant’s ability in research and writing
* Your opinion of the suitability of the proposed field of study/research area for the applicant

In order to assist the Applicant in receiving a prompt decision about their application we would be grateful if you could return the reference **within 10 working days**.

|  |
| --- |
| **REFERENCE**  ACADEMIC/CHARACTER (please delete as appropriate) |

**Please continue on a separate sheet if necessary**

**Signed ……………………………………….. Date ………………………**

**(Referee)**