Karnkanthi Education Program Referee

Contact details

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| --- | --- | --- | --- | --- | --- | --- |
| Referee Full name | | | |  | | |
| Student’s name | | |  | | | |
| Relationship to the student | | | | |  | |
| School or organisation (if applicable) | | | | | |  |
| Position |  | | | | | |
| Email address | |  | | | | |
| Phone number | |  | | | | |

Please comment on:

* The student’s academic achievements to date
* The student’s academic commitment, motivation, persistence and aspiration to succeed
* The student’s community/extra-curricular activities

Please also comment on anything else you feel we should know about the student.

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| --- | --- | --- | --- | --- |
| Name |  | Signature |  | Date |