

INSTRUCTIONS FOR A REFEREE SUPPORTING AN APPLICATION FOR SCHOLARSHIP TO A GRADUATE COURSE

(1) To be completed by the applicant

Applicant's Name

Last (family)		
First (personal)		
Title		(Mr/Mrs/Miss/Dr etc)

Proposed Study

Degree Type		<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time
Programme of study			
Department			

Contact Details

Email	
Telephone	

**Application Number
(if already available)**

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Date of Birth

DD	MM	YYYY

Sex

Male
 Female

Applicant's Signature

Signature	Date (DD/MM/YYYY)

(2) To be completed by the referee

Referee's Name

Name	
Position	

Referee's Contact Details

Email	
Telephone	
Address	
City	
Country	

Institution

Institution Name	
Dept/Faculty	

How long have you known the applicant?
In what context do you know him/her?

In comparison to other postgraduate applicants you have known, how would you rate this applicant?

<i>Tick as appropriate</i>	<i>Comments</i>
<input type="checkbox"/> Top 1% - Outstanding	
<input type="checkbox"/> Top 5% - Exceptional	
<input type="checkbox"/> Top 10% - Very Strong	
<input type="checkbox"/> Top 25% - Satisfactory	

Please write your reference or recommendation **in English** on a separate sheet of paper.

The reference should also be signed, and sent as a hard copy to 'The Director School of Post Graduate Studies and Research' Uganda Martyrs University P.O Box 5498 Kampala OR Scanned and sent to spgs@umu.ac.ug before close of business on the 16th July 2018.

In the reference letter comment on the applicant's academic fitness and general suitability to undertake and complete the proposed course of research or study, in relation to the qualification sought. Also include any other information which you think is relevant to the application.

(3) DECLARATION

I confirm that the information given above and on the appended reference letter is accurate to the best of my knowledge and understand That Uganda Martyrs University may refuse admission if it discovers that any information given has been falsified or is inaccurate.

Referee's Signature	Date (DD/MM/YYYY)

(4) DELIVERY

To deliver, please:

- 1) Enclose your reference with this form, and a copy of the applicants cover sheet in a SEALED envelope.
- 2) Sign your name across the seal and cover it with clear tape.
- 3) Send the reference to the address below:

School of Post Graduate Studies and Research
Uganda Martyrs University
P.O Box 5498 Kampala, Uganda
OR Email: spgs@umu.ac.ug