



## CONFIDENTIAL ACADEMIC REFERENCE FOR NURSING SCHOLARSHIP

The purpose of this Reference is to support students applying for TTH Nursing Scholarship. This Reference is supplied on the understanding that it is confidential to those involved in the scholarship selection process.

### Notes to the Referee

- Thank you for acting as a referee for the applicant named below. Your assistance will help us assess the applicant's suitability for the specified scholarship.
- Referees are kindly requested to complete this form and send it directly by email to [education@treetophospital.com](mailto:education@treetophospital.com) within two days.
- Please do not return this form to the applicant as this is a confidential report.

### Note to applicant

- Please complete section 1 and email it to your nominated academic referee.

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Section 1: To be completed by the Applicant	
Full Name:	
Date of Birth:	Gender: <input type="checkbox"/> Female   <input type="checkbox"/> Male
Nationality:	NID No:
Email Address:	
Contact number:	

Section 2: To be completed by the Referee		
Full Name:		
Nationality:		NID No:
Email Address:		
Contact number:		
Affiliated organization:		
Referee's expertise and experience		
Relationship with the applicant		
How long have you known the applicant?		

**Referee's knowledge of the applicant**

Would you recommend the applicant for the stated scholarship?  Yes  No

Please provide details to support your response to the question above.

**Please indicate your assessment of the applicant's attitude to work/study**

Perseverance                      Excellent ○ ○ ○ ○ Poor

Application to work              Excellent ○ ○ ○ ○ Poor

Acceptance of help                Excellent ○ ○ ○ ○ Poor

Initiative                          Excellent ○ ○ ○ ○ Poor

Information seeking              Excellent ○ ○ ○ ○ Poor

Motivation                         Excellent ○ ○ ○ ○ Poor

Referee's Signature: .....

Date: .....