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|  | PERKHIDMATAN UTAMASISWAZAHPEJABAT TIMBALAN NAIB CANSELOR(AKADEMIK & ANTARABANGSA) | UPM ICPREFEREE’S REPORT |

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| **PART A** | **TO BE COMPLETED BY THE APPLICANT** |

**The applicant is requested to fill in this section and forward this form to the referees.**

**Referees should not include personal acquaintances or relatives and at least one referee should be able to provide a report on your academic performance.**

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| 1. | **Full name:** | | |  | | | |
|  |  | | | ***First name*** | | ***Middle name*** | ***Last name*** |
|  | **(Please write your name according to I.C./passport)** | | | | | | |
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| 2. | **Programme and field of study applied:** | | | | | | |
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| 3. | **Faculty/Institute:** | | | |  | | |
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| **PART B** | | | **TO BE COMPLETED BY REFEREE (CONFIDENTIAL)** | | | | |

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| 1. | **Name:** | | |  | | | | | | | | **E-mail:** | | |  |
|  | **Permanent address:** | | | |  | | | | | | | | | | |
|  |  |  | | | | | | | | | | | | | |
|  | **Telephone no.:** | | | |  | | | | | | **Fax no.:** | | |  | |
|  | **Office address:** | | | |  | | | | | | | | | | |
|  |  |  | | | | | | | | | | | | | |
|  | **Telephone no.:** | | | |  | | | | | **Fax no.:** | | | |  | |
|  |  | | | | | |  | | | | |  | | | |
| 2. | **How long have you known the applicant and in what capacity?** | | | | | | | | | | | | | | |
|  |  | | | | | |  | | | | | |  | | |
|  | **Number of year(s):** | | | | |  | | |  | | | | | | |
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|  | **In my capacity as:** | | | | | | | | | | | |  | | |
|  |  |  | **Lecturer/Professor/Research advisor** | | | | | | | | | | | | |
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|  |  |  | **Employer** | | | | | | | | | | | | |
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|  |  |  | **Others, please specify:** | | | | |  | | | | | | | |

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| 3. | | **If the applicant has been your student, please rate the applicant as compared with other students in the same class.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | |  | | | *Top 5%* | | | |  |  | | *Top 10%* | | |  | |  | *Top 25%* | | | | | | | | |  | | |  | | *Top 50%* | | | | |
|  | |  | | |  | | | |  |  | |  | | |  | |  |  | | | | | | | | |  | | |  | |  | | | | |
| 4. | | **Please rate the applicant’s ability in relation to the following:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | |  | | | | | | | | | | | | | | | **Very good** | | | | | | | **Good** | | | | | **Fair** | | | | | | **Poor** | | |
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|  | | **Ability to work independently** | | | | | | | | | | | | | | |  | |  |  | | | |  | |  |  |  | |  | |  | | |  |  |  |
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|  | | **Communication skill** | | | | | | | | | | | | | | |  | |  |  | | | |  | |  |  |  | |  | |  | | |  |  |  |
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|  | | **Computer literacy** | | | | | | | | | | | | | | |  | |  |  | | | |  | |  |  |  | |  | |  | | |  |  |  |
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|  | | **Diligence** | | | | | | | | | | | | | | |  | |  |  | | | |  | |  |  |  | |  | |  | | |  |  |  |
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|  | | **Emotional maturity** | | | | | | | | | | | | | | |  | |  |  | | | |  | |  |  |  | |  | |  | | |  |  |  |
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|  | | **Enthusiasm** | | | | | | | | | | | | | | |  | |  |  | | | |  | |  |  |  | |  | |  | | |  |  |  |
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|  | | **Friendliness** | | | | | | | | | | | | | | |  | |  |  | | | |  | |  |  |  | |  | |  | | |  |  |  |
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|  | | **Initiative** | | | | | | | | | | | | | | |  | |  |  | | | |  | |  |  |  | |  | |  | | |  |  |  |
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|  | | **Intellectual ability** | | | | | | | | | | | | | | |  | |  |  | | | |  | |  |  |  | |  | |  | | |  |  |  |
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|  | | **Leadership qualities** | | | | | | | | | | | | | | |  | |  |  | | | |  | |  |  |  | |  | |  | | |  |  |  |
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|  | | **Potential to succeed in graduate studies** | | | | | | | | | | | | | | |  | |  |  | | | |  | |  |  |  | |  | |  | | |  |  |  |
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|  | | **Sense of responsibility** | | | | | | | | | | | | | | |  | |  |  | | | |  | |  |  |  | |  | |  | | |  |  |  |
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|  | | **Writing skill** | | | | | | | | | | | | | | |  | |  |  | | | |  | |  |  |  | |  | |  | | |  |  |  |
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| 5. | | **Other details:** | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
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|  | | **Signature and official stamp:** | | | | | | | | | | | |  | | | | | | |  | | | | **Date:** | | | | | | | | |  | | | |
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| **Please seal the completed form in an envelope and sign your name across the seal. Return the signed, sealed envelope to the applicant.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Thank you for your report** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |