## **Strictly Private and Confidential**



## Reference Form

The person named below has applied for a course with Arden University (formerly RDI). We would be grateful for your opinion of his/her suitability for this course. Any information you give will be treated in the strictest confidence. We may need to contact you if further clarification is required.

Name of Applicant			
Course Title		Start Date	
Are you happy to provide the candidate with a reference?	Yes No No		
Are you related to or a friend of the applicant?	Yes No No Please note, we are unable to accept references from relatives and friends.		
How long have you known the applicant?			
In what capacity have you known the applicant?			
Address			
Daytime telephone number			
Email			
In the event of a request by the candidate for access to this reference under the Data Protection Act, do you consent to disclosure of this reference to the individual?			

- Present/previous employers now complete part 1.
- Academic referees complete part 2 only.

When completed, please return the form to us by email:

applications@arden.ac.uk

Thank you for your assistance.

Email: <a href="mailto:enquiries@arden.ac.uk">enquiries@arden.ac.uk</a> Website: www.arden.ac.uk



Part 1: For completion by present/previous employers						
1	In what capacity is/was the candidate employed?					
2	Between which dates?	From	То			
3	Please comment on the following:					
The applicant's strengths						
The	applicant's weaknesses					
Their suitability for the course applied for						
Their dedication and commitment						
Their organisational skills						

Arden University Ltd
1A Brandon Lane, Coventry, CV3 3RD, England
Telephone: 024 765 15700 Facsimile: 024 76 578747 International: +44 24 765 15700 Email: <a href="mailto:enquiries@arden.ac.uk">enquiries@arden.ac.uk</a> Website: www.arden.ac.uk



Their interpersonal skills								
Their time management skills								
Their reliabil	ity							
Any other comments?								
	Name	Position	Date					
Company								
Signature								
	completion by acade							
Please provi	ide a brief assessment	of the applicant's suitability to study the	course applied for.					
	Name	Position	Date					
Company								
Signature								