ANAN UNIVERSITY

Kwall, Plateau State, Nigeria

REFEREE FORM

Print Date: 26/11/2026 16:22:01

NOTE: You are expected to scan this form and upload in PDF file format after filling it.

(PART 1)

Candidate's Referee details (three referees):

Name of Referee:
.....

Contact Address:
.....

Phone Numbers:
.....

Email Address:
.....

(PART 2)

Dear.....
The candidate whose details appear below wishes to undertake a post-graduate programme in our University and has chosen you as a referee. Kindly assist in completing this form in order to enable us determine the candidate's suitability for the selected academic programme.

Candidate Details:

Name:
.....
Course of Study:
.....
Department:
.....

Faculty/School:
.....

Faculty/School:
.....

Degree Applied For:

.....

(a)Mode of Study: Full-time (b)Part-time

1. How long have you known the candidate?
   (a) 1-5 years
   (b) 6-10 years
   (c) 11 years & above
2. In what capacity have you know the candidate?
   (a) Sibling/Relative
   (b) Friend
   (c) Spouse
   (d) Colleague
   (e) Former student

3. Please rate the candidate on the following characteristic

	Excellent	Very good	Good	Above average	Average	Below Average
Intelligent capacity						
Capacity for independent academic study						
Creative and imaginative capacity						
Promise of productive scholarship						
Moral character						
Emotional and psychological stability						
Ability for oral and written expression in English lang.						

4. Can you accept the candidate as a research student, should the need arise?
   (a)Yes
   (b)No
5. Please, make an overall evaluation of the candidate?

.....

.....

Below Average	Average	Above Average	Good	Outstanding	Very exceptional

6. Have you any objection, if the content of this evaluation may be disclosed to any award giving organization if the need arises?

(a)Yes

(b)No

7. Comment freely on the candidate?

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…….. ……..

Name of Referee Signature of Referee/Date

…….. ……..

Rank/Profession of Referee Institution/Organization