

# Reference for Postgraduate Study

To the Candidate

Please complete in BLOCK CAPITALS in black ink, or typescript. **Ensuring that the information on this page is the same as on your application form**, please complete the details on this page before sending a form to each of the referees you have named.

**The reference must be written by the named referee.**

At least one reference must be from someone who knows you in an academic context and is qualified to comment on your suitability for your chosen course of study. MBA applicants must provide an employer reference.

We regret that character references from friends/family and emailed references are **not** acceptable.

## Details

Applicant's Date of Birth

— — — — —  
day month year

Applicant's full name (please underline your surname  
(family name))

Referee Details

Name:

Address:

Tel No:

Email:

Applicant's permanent home address

Postgraduate start date

— — — —  
month year

To the Referee

This candidate has applied to the University for the programme shown above and has given your name as a referee. I should be grateful if you could let me have your opinion of the candidate's suitability for that programme as soon as possible. If there is a first degree examination outstanding I would appreciate some indication of the overall degree grade/class which you expect this candidate to obtain.

For non-UK studies, please state the language of the entire teaching and assessment.  
Please use the space on the back of this form for your reference. Please note that the information provided may be disclosed to the candidate at a later date.

If you wish, instead of attaching a separate reference letter it must be official business letterhead, written, dated and signed by the referee within the last 3 months.

Thank you for your assistance.

PLEASE RETURN THE COMPLETED REFERENCE TO:

Admissions Officer (fhs.admiss@hull.ac.uk)

OR

Faculty of Health Sciences  
Calder Reception  
University of Hull  
HU6 7RX

Full name of referee:

Address:

Email:

Reference provided for:

Applicant’s name:

Date of Birth:

Please provide here, an official Business Stamp  
if reference is in your capacity within a  
Business or Academic Institution  
(or attach a business letterhead)

Relationship to the applicant:

- ☐ Employer ☐ Manager ☐ Research Supervisor
- ☐ Instructor in several classes ☐ Other .....

Number of years the applicant has been known to you.....

Reference

PLEASE CONTINUE ON A SEPARATE SHEET IF NECESSARY

Referee’s Signature

Date