

Reference Level 2 Course

Applicants:

You need to complete a reference from your Head of Year or Form/Personal Tutor to support your application. Please pass this reference request to your teacher, college tutor, employer or a professional person whom you have known for more than 12 months.

| months. | .o your teacher, | college tut | or, emplo | yer or a pro | ressic | mai persoi | n wnom | you nave | KNOWN T | ז פוטווו וכ | .nan 12 |
|--|------------------------------------|-------------|-----------|--------------|------------------|------------|--------|---------------------|---------|-----------------|---------|
| To be completed b | y the Applicant | | | | | | | | | | |
| Applicant's Name | licant's Name | | 2 | | | | | e of Birth | | | |
| Address | | | | | | | | | • | | |
| | | | | | | | Pos | tcode | | | |
| Programme applied | d for | | | | | | I | | | | |
| Please complete th References are valu | | | | | nis ca | ndidate is | - | | _ | - | ogramn |
| Attendance % to date this year | | | | Punctual | Punctuality Good | | | Poor | | | |
| Has the student evexcluded? If so, pledetails. | | | | | | | | | | | |
| Cuita | nrio. | Alway | 'S | | Sometimes | | | Needs improvement | | | |
| Crite | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| Displays appropriat | te behaviour? | | | | | | | | | | |
| Is sensitive and able feelings of others? Shows enthusiasm towards achieving a qualification/course applied for? Has potential to wo | & motivation the e they have | ne | | | | | | | | | |
| independently? | ЛК | | | | | | | | | | |
| Is able to communicate clearly one-to-one? | | - | | | | | | | | | |
| Is able to communi in a group? | cate confidently | , | | | | | | | | | |
| Is able to use feedback to improve | | | | | | | | | | | |
| written work and performance? Meets deadlines? | | | | | | | | | | | |
| To be completed b | y school/college | • | | | | | | | | <u> </u> | |
| Award / Level | ward / Level Subject | | | | | | | Predicated Grade | | Actual Grade | |
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| For completion by all referees - I have known the applicant for: (please complete) | | | | | | | | | | |
|--|--------|---------------|--|--|--|--|--|--|--|--|
| Additional learning needs including dyslexia, dyspraxia, autism/Asperger's, ADHD, physical difficulties, health issues or problems with mental well-being: | | | | | | | | | | |
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| Health and wellbeing issues: | | | | | | | | | | |
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| Please add an overall comment regarding the suitability of this applicant for the above mentioned course | | | | | | | | | | |
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| | T T | | | | | | | | | |
| Signed | Name (| please print) | | | | | | | | |
| Job Title | 1 . | | | | | | | | | |
| Work Email | Work T | elenhone | | | | | | | | |

Please pass back to candidate in order for them to upload to their myVISION account at https://www.wnc.ac.uk/myVision/Login.aspx

Date

Name of School

If confidential, please send to send to admissions@wnc.ac.uk