

ACCOMMODATION CHARACTER REFERENCE FOR NON-SCHOOL LEAVERS

APPLICANT DETAILS

Family Name

First Name

Year Applying

Date of Birth (DD/MM/YYYY)

How long have you known the applicant? Years Months

How well do you know them?

What is your relationship with the applicant?

Do you consider the applicant to be a good candidate for living in residence? Yes No

REFEREE COMMENTS

Positive influence on others

Initiative

Interpersonal skills

Sense of responsibility

Integrity

Community involvement
and encouragement

Purposefulness

Academic ability

Time management

Self-confidence / self-reliance /
adaptability to new situations

Do you feel the residential life experience will
benefit the applicant and those around them?

REFEREE DETAILS

Referee Name

Organization Name

Position / Title

Phone Number

Email Address

Date (DD/MM/YYYY)