



PO Box 5300 Sydney, NS Canada B1P 6L2

NOTE TO THE APPLICANT

The reference form is to be completed by a person who knows well your capabilities. Your referee **MUST** directly mail this form and a letter to Student Services, Cape Breton University.

THIS SECTION TO BE COMPLETED BY THE APPLICANT			
FULL NAME OF APPLICANT:			
MAILING ADDRESS:			
TELEPHONE:		E-MAIL:	

ALL INFORMATION BELOW TO BE FILLED BY THE REFEREE

NOTE TO THE INDIVIDUAL COMPLETING THIS FORM

The individual named above has applied to the Cape Breton University MBA in Community Economic Development (CED) program. Your detailed assessment of this applicant will assist the Selection Committee in determining the suitability of this applicant for a rigorous graduate program and for scholarship purposes. We thank you for taking the time to provide a thorough and fair evaluation of this candidate.

PLEASE PRINT HERE AND SIGN ON REVERSE			
NAME OF REFEREE:		POSITION/RANK:	
INSTITUTION:		TELEPHONE:	
MAILING ADDRESS:		FAX:	
		E-MAIL	

KNOWLEDGE OF APPLICANT	
HOW LONG HAVE YOU KNOWN THE APPLICANT (MONTHS / YEARS)?	
IN WHAT CAPACITY DO YOU KNOW / DID YOU KNOW THIS APPLICANT?	
HOW WELL DO YOU KNOW THE APPLICANT?	

NOTE: Cape Breton University attempts to verify all references for application to the MBA in CED. References will only be shared with the written authorization from the referee.

CHARACTERISTICS OF APPLICANT	OUTSTANDING (TOP 5%)	ABOVE AVERAGE (5-25%)	AVERAGE (25-50%)	BELOW AVERAGE (LOWER 50%)	NO BASIS FOR JUDGEMENT
ENGLISH PROFICIENCY – WRITTEN					
ENGLISH PROFICIENCY – ORAL					
ANALYTICAL SKILLS					
INTERPERSONAL SKILLS					
INTELLECTUAL ABILITY					
INITIATIVE					
ORGANIZATIONAL SKILLS					
CREATIVE AND ORIGINAL THINKING					
SELF CONFIDENCE					
INTEGRITY					
RESOURCEFULNESS					
TIME MANAGEMENT SKILLS					
ABILITY TO DISCUSS CRITICALLY					
ABILITY TO EXPRESS IDEAS CLEARLY					
POTENTIAL FOR BECOMING A SUCCESSFUL LEADER OR MANAGER					

IF YOU WERE RESPONSIBLE FOR THE ADMISSION DECISION FOR THIS APPLICANT, WHICH OF THE FOLLOWING WOULD BEST REPRESENT YOUR ACTION (CHECK ONLY ONE, PLEASE)?	
<input type="checkbox"/> ACCEPT WITHOUT RESERVATIONS	<input type="checkbox"/> ACCEPT WITH SOME RESERVATIONS
<input type="checkbox"/> ACCEPT	<input type="checkbox"/> DO NOT ACCEPT
ADDITIONAL COMMENTS	

Please provide answers to the following in a letter to the Selection Committee. The letter must be in your official letterhead or must have the seal of your organization. Please sign and date the letter. Please send the letter along with this form to:

Student Services	Tel: 1-888-959-9995 / 902-563-1117
Cape Breton University	Fax: 902-563-1371
PO Box 5300, 1250 Grand Lake Rd	E-mail: admissions@cbu.ca
Sydney, Nova Scotia, B1P 6L2	Web Site: http://www.cbu.ca/

1. What are the main strengths of the applicant?
 2. What are the applicant's weaknesses and areas that need improvement?
 3. Comment on the applicant's ability to work independently and complete projects in a timely manner.
 4. Does the applicant have promise for a successful career in this field of business and development?
- Please include any other information you deem pertinent to this applicant's MBA in CED application.

SIGNATURE

DATE