

Department of Physiotherapy

Faculty of Allied Health Sciences, University of Peradeniya

MSc in Physiotherapy Programme

REFEREE'S REPORT

SECTION 'A' (To be completed by the Candidate)

Full Name of Applicant:

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Name of the Referee:

Title:

Institution:

I, (name) hereby waive my right of access to this reference report.

Signature of Applicant :

(To be signed by applicant before handing this form to the referee).

SECTION 'B' (To be completed by the Referee)

Please tick the appropriate Box (Boxes) below to indicate your level of association with the applicant.

a	<input type="checkbox"/>	This student was enrolled in my class/es
b	<input type="checkbox"/>	I was this student's undergraduate/ Project/ Research advisor
c	<input type="checkbox"/>	While I have not taught or advised the applicant, I have known the applicant foryears.
d	<input type="checkbox"/>	I supervised or directed the work of the applicant foryears.
e	<input type="checkbox"/>	I do not know this individual well enough to evaluate.

Please evaluate the applicant by placing a tick (✓) after each characteristic that most nearly represents your opinion. Compare the applicant with a representative group of students qualified for graduate study whom you have known and who have had approximately the same amount of experience and training as the applicant. If you lack knowledge to make a definite rating, give your estimate of applicant's ability, by checking the last column.

	Below Average	Average	Good	Superior (Top 10%)	Inadequate Opportunity to Observe
a. Ability to master academic work					
b. Ability in oral expression in English					
c. Ability in written expression in English					
d. Motivation					
e. Emotional stability and maturity					
f. Self-resilience and independence					

In the space below or as an attachment, please add any comments which will assist in our making a judgment as to whether the applicant should be admitted to the programme of study applied for.

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Signature	Date
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Please send the soft copy of the completed Referee's Report directly to the following email address to reach on or before 15th October 2024: **pgphysio@ahs.pdn.ac.lk**

These referee reports should be e-mailed from the official email address of the relevant referee.