Reference Form for Auditors - Confidential

DocRef: EN\_MA\_Ref\_20200310

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| --- | --- |
| Applicant’s Full Name |  |
| has applied to our school to study as a Matriculated Auditor and has provided your name as a reference. Your assessment contributes substantially to our evaluation of an applicant's suitability for study in our program. We ask you to describe his/her qualities, and also to critically assess his/ her weaknesses.  To make your assessment somewhat easier, the form provided here indicate the factors that we weigh in selecting applicants. However, you are of course free to write in a form that suits you personally.  Your assessment will be treated strictly confidentially and will be read by the Director of Admissions and Studies Secretary only.  We wish to thank you for your valuable contribution. | |
| **Please send your reply as soon as possible directly to:**  ISAPZURICH, Studies Secretary, Stampfenbachstrasse 115, 8006 Zürich, Switzerland, or email to [studies@isapzurich.com](mailto:studies@isapzurich.com) | |

|  |  |
| --- | --- |
| Referee’s Information | |
| Full Name |  |
| Profession/Activity |  |
| Function, Position |  |
| Academic Status |  |
| Relationship to the Applicant | |
| *In what context do you know the applicant:* | |
|  | |
| *How well do you know the applicant:* | |
|  | |

CONfidential

Your Assessment of the Applicant:

|  |
| --- |
| In your opinion, what motivates his / her choice to train for future work as a psychoanalyst? |
|  |
| What do you see as being his / her strengths? |
|  |
| What do you see as being his / her weaknesses? |
|  |
| How would you assess his / her potential to develop? |
|  |
| **Date & Signature:** |