

**SIR ARTHUR LEWIS COMMUNITY COLLEGE**

Morne Fortune, Castries, St Lucia, West Indies

Telephone: (758) 457-7300

Facsimile: (758) 452-7901

WEBSITE: www.salcc.edu.lc

**CONFIDENTIAL REFEREE FORM**

**FROM:** The Registrar  
 Sir Arthur Lewis Community College  
 Morne Fortune, Castries  
 St Lucia, WI  
 Telephone: 457-7300

**PART 1** To be completed by the Applicant

Name of Applicant: .....Program/Course applied for: .....

**PART 2** To be completed by the: Principal, Employer, School Teacher, Priest/Pastor or other suitable individuals.

**The Sir Arthur Lewis Community College would be grateful if you would please enter an X in the appropriate column to indicate your assessment of the applicant's capabilities. We invite you to add additional comments below.**

		Outstanding	Above Average	Average	Below Average	Unable to rate Applicant
Academic Potential						
Ability to Express Himself/Herself:	Orally					
	In writing					
Motivation						
Punctuality						
Regularity						
Perseverance						
Accountability and responsibility						
Demonstrates sound moral values						
Honest and Upright						
Dependable and reliable						
Uses sound judgment						
Attitude/discipline towards work/school						
Ability to get on with Peers/within a Team						
Ability to get on with teachers/Persons in Authority						
Potential of this Applicant for Self Development and Advancement						

**Further Comments:**

.....  
 .....  
 .....  
 .....

By my signature, I hereby declare that above name applicant is \_\_\_ a suitable \_\_\_ not a suitable candidate for the programme of study for which (s) he has applied. (Check One)

Referee's Name: .....

Mailing Address: .....

Telephone Number: .....

Signature: .....

Date: .....

**Please return completed form in a sealed envelope under confidential cover to the Registrar.**

**May I take this opportunity to thank you for your co-operation.**