



DIPLOMA PROGRAMMES REFERENCE

CONFIDENTIAL

Name of applicant _____

Diploma programme _____

REPORT TO BE COMPLETED BY A PROFESSIONAL OR ACADEMIC REFEREE

Please testify to the applicant's character, technical ability and qualifications for the programme. Continue over the page if necessary.

Name of referee _____

Capacity in which you know the applicant _____

Address _____

Telephone _____ Fax _____

E-mail _____

Signature _____ Date _____

Please sign, and forward by return to:

Academic Admissions Officer, Academic Office, West Dean College, West Dean, Chichester, West Sussex, PO18 0QZ, UK

T +44 (0) 1243 818299 F +44 (0) 1243 818291 E diplomas@westdean.org.uk W www.westdean.org.uk