

## CONFIDENTIAL STATEMENT ON APPLICANT FOR ADMISSION TO MEDICAL SCHOOL

To: Professor / Tutor / School or College Principal Dear Colleague, Please complete this form and seal it in an envelope marked "Confidential". Comments and information will be treated in the strictest confidence. Surname of Applicant: \_\_\_\_\_\_\_(BLOCK CAPITALS) Other names **STATEMENT BY**: Name: Position (Headmistress, Headmaster, etc.): School, etc: How long has the student been attending your school? Your recommendations on this applicant's suitability for training as a doctor. ☐ Recommend ☐ Recommend with reservation FURTHER INFORMATION CONCERNING THE CANDIDATE Please comment on the following points:-Character and personality: 2. Intellectual qualities and promise : Positions of responsibility: 3. Athletic, social, artistic and other interests and achievements : Are there any grounds based on your knowledge of the student's general health and background which might handicap him/her in any way for training as a doctor? General comments of other information (e.g. personal or domestic circumstances, if these have a bearing on the assessment of the candidate's application): 7. Ability to speak and write fluently in English:

How does the applicant rate in the areas listed below?

PERSONAL QUALITIES	Excellent	Good	Average	Poor	No Comments	
Demeanor						
Self - confidence						
Emotional stability						
Ability to communicate						
General appearance						
Reliability, responsibility						
Social maturity						
Motivation						
Social work						
Team work						
Leadership qualities						
SCHOLASTIC QUALIFICATION						
Mental ability						
Application to work						
Oral expression						
Written expression						
Intellectual interest						
Please itemise <b>forthcoming</b> examination	ns - stating : subj	ects, level and e	expected grade	S		
Name of Examination	Level	Subjects		Ex	Expected Grades	
Official Stamp						
Signature : Date :						
Signature :			Date :			