



RCSI + UCD MALAYSIA CAMPUS

Irish Education | Global Recognition
(formerly known as Penang Medical College)

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)

First Name : _____

STATEMENT BY:

Name : _____

Position (Principal, etc) : _____

School/College/University : _____

How long has the student
been attending your school? : _____

Your recommendations on this applicant's suitability for training as a doctor.

Do you... Highly recommend Recommend Recommend with reservation

FUTHER INFORMATION CONCERNING THE CANDIDATE

Please comment on the following points:-

1. Character and personality: _____

2. Academic qualities and promise: _____

3. Positions of responsibility: _____

4. Circumstances, special background information, or other factors pertinent to the overall evaluation of the applicant: _____

5. 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 Opinion
Academic Promise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Character and Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional Stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self Reliance and Independence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relationship with Peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Work in Teams	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Verbal Skills in English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written Skills in English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall Recommendation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please itemise **forthcoming examinations** – stating : subjects, level and expected grades

Name of Examination	Level	Subjects	Expected Grades

Official Stamp

Signature: _____ **Date:** _____

If you would like to expand your comments or provide additional information, please do so on a separate page and include with this reference. All comments and information are treated in the strictest of confidence.