



**An Coláiste Ollscoile, Baile Átha Cliath**  
Ollscoil Domhanda na hÉireann

**University College Dublin**  
Ireland's Global University

**Scoil Na nAltrachta, an Chnáimhseachais**  
agus na gCóras Sláinte UCD

**UCD School of Nursing, Midwifery**  
and Health Systems

Ionad Eolaíochta Sláinte,  
An Coláiste Ollscoile, Báile Átha Cliath,  
Belfield, Báile Átha Cliath 4, Éire.

Health Science Building,  
University College Dublin,  
Belfield, Dublin 4, Ireland

[www.ucd.ie/nmhs](http://www.ucd.ie/nmhs)

T: +353 1 716 6488

### PROFESSIONAL REFERENCE FORM

<b>Programme Applied for:</b>	
<b>Name of Candidate:</b>	
<b>Address of Candidate:</b>	

Dear Sir or Madam,

I would be grateful if you would complete this reference for the above named applicant who is applying to complete a programme of study in UCD School of Nursing Midwifery & Health Systems. No final decision can be made concerning the application until references are received, so I would be grateful for your attention to this request. Please return the form to the candidate as it is his/her responsibility to upload this reference onto their UCD application form.

Yours sincerely,

**Dr. Rita Smith**  
*Associate Dean for Taught Graduate Studies*



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Please give your assessment of the applicant's suitability for the programme with regard to all of the following 6 categories.

<b>1. Quality of decision making</b>
<b>2. Initiative</b>
<b>3. Ability to work without direct supervision.</b>
<b>4. Sensitivity to and tolerance of others.</b>
<b>5. Attendance</b>



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**6. Other abilities you think will support the candidate in this application: All information will, of course, be treated with strict confidence.**

Referee Name: \_\_\_\_\_

Referee Signature: \_\_\_\_\_

Referee Position:	
Date:	
Institution Name:	