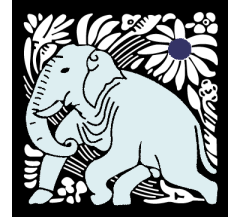


Asia Pacific Scholarship Consortium

Masters Scholarships for Individuals

from Myanmar, Cambodia, Thailand and Lao PDR



All information in this form will be kept strictly confidential and will be read only by members of the APSC selection committee and the applicant's prospective university. Please answer all questions clearly in English. **Application Deadline: November 15, 2012**

P.O. Box 196, Chiang Mai
University Post Office,
A. Muang, Chiang Mai,
50202, Thailand
apsc.ref@gmail.com

Applicant Name:

Date:



Reference Information

THIS FORM SHOULD BE COMPLETED AND **DIRECTLY** SUBMITTED TO **APSCONSORTIUM@GMAIL.COM** BY A REFEREE WHO HAS TAUGHT OR SUPERVISED THE APPLICANT IN AN ACADEMIC OR PROFESSIONAL SETTING.

The free Adobe Reader (version 7.0 or higher) is required to complete this form. If you donot have the free Adobe reader, you can download it here for free: http://www.adobe.com/products/acrobat/readstep2_allversions.html. If you are unable to download and use the program, you may fill this form by hand, then scan and email it to **apscconsortium@gmail.com**.

Name of Referee: _____ Academic Reference Professional Reference

Name of Organization/ Institution: _____

Referee's Position/Title: _____

How long have you known this applicant?

In what capacity have you known this applicant?

PLEASE COMMENT AND RANK THE APPLICANT'S ABILITIES IN THE FOLLOWING AREAS:

	Excellent	Good	Average	Below Average	Unobserved
Analytical:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Writing:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Presentation:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adaptability:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compatibility:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Referee Name: _____

ApplicantName: _____

PLEASE COMMENT ON THE FOLLOWING PARAGRAPH:

Do you think the applicant is suitable for a masters scholarship? Why or why not? Please describe the applicant's level of commitment to their chosen field of study and related academic or professional work. Also include any other information that may be important for the scholarship selection committee. Attach additional pages if necessary. **Very brief answers are strongly discouraged.**

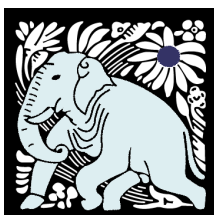
We sincerely thank you for your time, and feel free to let us know if you have any questions about this process.

PLEASE READ BELOW AND SIGN IF YOU CONSENT TO THE FOLLOWING:

I certify that the above information is correct. I authorize Asia Pacific Scholarship Consortium to share this recommendation with the APSC Scholarship Committee and the applicant's prospective college or university. This information will otherwise remain confidential.

Type Full Name Here

Date:



PLEASE E-MAIL THIS COMPLETED FORM TO:

apsconsortium@gmail.com

Referee Name:

ApplicantName: