Application for Admission to the Master Degree Course in Electronics Engineering (MSc EE)

REFERENCE REQUEST

Details of Applicant

Family Name	
Given Name	
Date of Birth/Place of Birth	
Address	

Master Degree Course applied for: **ELECTRONICS ENGINEERING (MSc EE)**

Course Profile: Microsystems Engineering   ☐
Intelligent Sensors & Instrumentation   ☐
Communications Systems Engineering   ☐

To the Referee

The above person has applied to Hochschule Bremen for the postgraduate course detailed above and has given your name as a referee.
It would be of great assistance to the Hochschule in considering the application if you would kindly complete this form of reference. When you have completed this form please return it to the applicant in the enclosed envelope, signed across the seal to ensure confidentiality.

The applicant will forward the sealed envelope to us together with his/her application form.
The application will not be processed until references are received.

1. **How long have you known the applicant and in what connection?**

2. **How do you rate the applicant's academic ability?**
   If he/she is about to take any further examinations what results do you think will be achieved?

3. **Please rate the applicant on the qualities listed below by circling the appropriate number on the following scale:**

	Excellent	*Above average*	*Average*	*Below average*	*Poor*
The power to grasp concepts and to reason analytically	1	2	3	4	5
Capacity for original thought; the ability to generate new ideas	1	2	3	4	5
The ability to organise himself/herself and others and get things done	1	2	3	4	5
The ability to get on with people; poise and ease in varied situations	1	2	3	4	5
The ability to see things through to successful conclusions	1	2	3	4	5

4. **Does the applicant have any other major strengths or weaknesses of which you are aware which might influence his/her studies on a postgraduate master course?**

5. **Do you believe the applicant will profit from this postgraduate course, if accepted?**

Very much so ☐   Yes ☐   Probably ☐   Don't know ☐   Unlikely ☐

6. **If the applicant's first language is not English or German, please rate his/her linguistic abilities on the following scale by circling the appropriate number.**

	Excellent	*Above average*	*Average*	*Below average*	*Poor*
Spoken English / German	1 / 1	2 / 2	3 / 3	4 / 4	5 / 5
Written English / German	1 / 1	2 / 2	3 / 3	4 / 3	5 / 5
Comprehension of English / German	1 / 1	2 / 2	3 / 3	4 / 4	5 / 5

Thank you for your co-operation.

Name of Referee: _____

Position: _____

Organization address: _____

_____

_____

Telephone: _____

EMail: _____

_____   _____   _____
                    Place   Date (day/month/year)   Referees Signature