



MONTEGO BAY COMMUNITY COLLEGE

CONFIDENTIAL REFEREE REPORT

TEL: (876) 979-8150/8164; 953-6838/6850/6851

FAX: (876) 979-8776

Email: info@mbcc.edu.jm

Website: www.mbcc.edu.jm

Applicants who completed high school within the last two (2) years: this form **must** be completed by your Principal, Vice-Principal or Guidance Counselor at the last school attended.

All other applicants: this form may be completed by your Employer, a Pastor, or a Justice of the Peace.

Form should be submitted to the College no later the date specified. Kindly see page entitled **Important Dates and Deadlines**.

To the person completing this form: Kindly ensure that the applicant's name and the programme being applied for are written on the envelope.

_____ (formerly) of _____ has
Name of Student *Name of Institution/Company/Address*

applied to Montego Bay Community College to pursue the _____ programme.
Name of Programme

Kindly indicate your assessment of this applicant by placing a tick (✓) in the appropriate spaces below. Please place the form in the envelope provided, seal it, and affix the school/business stamp across the flap before returning the document to the applicant.

Ratings

Criteria	Excellent	Good	Average	Poor
Academic Performance / Work Performance				
Potential for success in the chosen area				
Seriousness of purpose				
Conduct				
Attendance				
Punctuality				

Outstanding Achievements _____

Breach of discipline _____

Do you recommend this applicant as a suitable candidate for admission to Montego Bay Community College?

Other comments _____

Name: _____

School Stamp/Business Stamp

School/Company: _____

Position: _____

Please call our Guidance Counselor to discuss any information that you do deem highly confidential to be recorded on this instrument.

Please Detach Here