 Training Programme

# Reference Check

Please complete and submit directly to the College office, [education@nzcphm.org.nz](mailto:education@nzcphm.org.nz)

Please note that under the Privacy Act 1993 the applicant may request to view this report. If you wish to speak to someone in confidence please contact the Training Programme Director, Dr Polly Atatoa Carr, at [polly@nzcphm.org.nz](mailto:polly@nzcphm.org.nz).

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| **Section 1 – Applicant and referee details** | | | |
| **Candidate name** |  | | |
| **Referee** |  | **Position** |  |
| **Phone number** |  | **Email** |  |

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| **Section 2 – to be completed by the referee** |
| What is/was your working relationship with the candidate? |
| How long have you known the candidate? |
| What are their key strengths? |
| What are their key areas for development? |
| The qualities we are looking for in our trainees are listed below. Please comment on the extent to which the candidate possesses these qualities: |
| 1. A strong interest in Public Health Medicine |
| 1. Strong verbal and written communication skills |
| 1. The ability to work collaboratively in a team |
| 1. Leadership skills |
| 1. Strong critical / analytical thinking |
| 1. Good organisational and planning skills |
| 1. Conflict management skills |
| 1. Broad strategic outlook |
| Are there any areas of concern we should be aware of? |
| Would you recommend the candidate for the training programme in Public Health Medicine? If so, why? |

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| **Section 3 – Signature** | |
| **Referee** |  |
| **Date** |  |