



**RECOMMENDATION FORM FOR THE MWALIMU JULIUS NYERERE  
SCHOLARSHIP  
(MASTERS DEGREE PROGRAMMES)**

PLEASE TYPE OR USE BLOCK CAPITALS IN BLACK INK AND WRITE INSIDE THE BOXES	
<b>Applicant</b>	Please complete this section. Give this form to the person who will act as your referee. The form should be submitted together with the application form in a sealed envelope
<b>Surname/ Family Name:</b>	<b>Other Name(s):</b>
<b>Applicant's Signature:</b>	<b>Date:</b>

<b>Referee:</b>	To enable us assess the candidate's suitability for the Scholarship, we kindly request that you evaluate the candidate in the areas indicated in the table below (Tick the appropriate cell). Please indicate the applicant's qualifications and potential for the award of the Scholarship and to undertake the Master's Programme. Describe the applicant's motivation and intellect and indicate both strong and weak points. Please be frank.				
<b>How long have you known the Applicant?</b>					
<b>In what capacity?</b>					
	<b>Excellent</b>	<b>Good</b>	<b>Average</b>	<b>Poor</b>	<b>Very Poor</b>
<b>Intellectual Ability</b>					
<b>Capacity for Original Thinking</b>					
<b>Maturity</b>					
<b>Motivation for Postgraduate Studies</b>					
<b>Ability to work with others:</b>					
<b>Other capabilities/talents worth mentioning</b>					
<b>What do you consider to be the Applicant' weaknesses?</b>					
<b>What is your recommendation on the suitability of the applicant to the Scholarship</b>					

Give any other additional comments that you consider relevant about the applicant	
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<b>Referee's Name and Contacts.</b>		
<b>Name:</b>	<b>Title (Dr./Prof./Mr./Mrs./Miss./Ms.)</b>	
<b>Institution:</b>	<b>Position:</b>	
<b>Postal Address :</b>	<b>Telephone (Landline):</b>	
	<b>Telephone (Mobile):</b>	
<b>Fax :</b>	<b>E-mail:</b>	
<b>Referee's Signature:</b>	<b>Date:</b>	