CAPE BRETON UNIVERSITY

PO Box 5300 Sydney, NS Canada B1P 6L2

MASTER OF BUSINESS ADMINISTRATION IN COMMUNITY ECONOMIC DEVELOPMENT
SHANNON SCHOOL OF BUSINESS

TEL: 902-563-1467 FAX: 902-562-0075 E-MAIL: mba@cbu.ca

NOTE TO THE APPLICANT

The reference form is to be completed by a person who knows well your capabilities. Your referee MUST directly mail this form and a letter to Student Services, Cape Breton University.

THIS SECTION TO BE COMPLETED BY THE APPLICANT									
FULL NAME OF APPLIC	CANT:								
MAILING ADDRESS:									
TELEPHONE:		E-MA	IL:						
ALL INFORMATION BELOW TO BE FILLED BY THE REFEREE									
Note to the individual completing this form The individual named above has applied to the Cape Breton University MBA in Community Economic Development (CED) program. Your detailed assessment of this applicant will assist the Selection Committee in determining the suitability of this applicant for a rigorous graduate program and for scholarship purposes. We thank you for taking the time to provide a thorough and fair evaluation of this candidate.									
PLEASE PRINT HERE AND SIGN ON REVERSE									
NAME OF REFEREE:	::		POSITION/RANK:						
INSTITUTION:			PHONE:						
MAILING ADDRESS:		FAX:							
		E-MA	IL						
KNOWLEDGE OF APPLICANT									
HOW LONG HAVE YOU KNOWN THE APPLICANT (MONTHS / YEARS)?									
IN WHAT CAPACITY DO YOU KNOW / DID YOU KNOW THIS APPLICANT?									
How well do you know the applicant?									

Note: Cape Breton University attempts to verify all references for application to the MBA in CED. References will only be shared with the written authorization from the referee.

CHARACTERISTICS OF APPLICANT	OUTSTANDING (TOP 5%)	ABOVE AVERAGE (5-25%)	AVERAGE (25-50%)	BELOW AVERAGE (LOWER 50%)	NO BASIS FOR JUDGEMENT	
ENGLISH PROFICIENCY - WRITTEN		,				
ENGLISH PROFICIENCY - ORAL						
ANALYTICAL SKILLS						
INTERPERSONAL SKILLS						
INTELLECTUAL ABILITY						
INITIATIVE						
ORGANIZATIONAL SKILLS						
CREATIVE AND ORIGINAL THINKING						
SELF CONFIDENCE						
INTEGRITY						
RESOURCEFULNESS						
TIME MANAGEMENT SKILLS						
ABILITY TO DISCUSS CRITICALLY						
ABILITY TO EXPRESS IDEAS CLEARLY						
POTENTIAL FOR BECOMING A SUCCESSFUL LEADER OR MANAGER						
REPRESENT YOUR ACTION (CHECK ONLY ACCEPT WITHOUT RESERVATIONS ACCEPT ADDITIONAL COMMENTS	[☐ ACCEPT WITH SON	ME RESERVATIONS	3		
	the Selection Committee. The letter must be in your official n. Please sign and date the letter. Please send the letter along with Tel: 1-888-959-9995 / 902-563-1117 Fax: 902-563-1371 E-mail: admissions@cbu.ca Web Site: http://www.cbu.ca/					
 Comment on the applicant's ability Does the applicant have promise Please include any other information y 	y to work indeper for a successful o	ndently and comple career in this field o	ete projects in a toof business and o	development?		
SIGNATURE			DATE			