



## PROFESSIONAL REFERENCE FORM (Confidential)

Master of Arts Program  
Child, Youth, Family and Community Studies

### TO BE COMPLETED BY THE APPLICANT:

Complete this section **before** sending the professional reference form to your referee.

Name:

Email:

Student or Application Number:

What is your relationship to the referee?

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### TO BE COMPLETED BY THE REFEREE:

*The above-named applicant has applied to the Master of Arts in Child, Youth, Family and Community Studies program at the University of Victoria. The applicant has stated that they have two years of relevant work experience, including having worked with you/under your supervision.*

What is/was your relationship to the applicant?

How long have you known the applicant?

When did your working relationship end or is it ongoing?

What is the name of the agency or organization in which you supervised/worked with the applicant?

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*Please provide a brief evaluation of the applicant by responding to the following.*

Please assess the applicant's practice experience and skills (e.g., interviewing skills, crisis intervention, caseload management, delivering therapeutic interventions, group skills, etc.):

Please assess the applicant's capacity to multi-task and meet deadlines in a demanding practice environment:

Please assess the applicant's capacity to work effectively in teams, independently, and in a supervisory relationship:

Please assess the applicant's capacity to take direction and respond to feedback:

Please describe the applicant's capacity for critical reflection and conflict resolution:

Please describe the applicant's skills in interpersonal communication:

Please assess the applicant's capacity to foster inclusion and well-being of socially-excluded groups (e.g., Indigenous, Black, people of colour, LGBTTTQQ2S, gender diverse, low income clients, etc.) and address systemic barriers in practice:

Please describe 2-3 strengths of this applicant:

We appreciate that referees will want to highlight an applicant's strengths, and we also greatly value constructive feedback. Please describe 2-3 challenges and/or areas for future growth and development:

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**TO BE COMPLETED BY THE REFEREE:**

Name:

Signature:

Date:

E-mail:

Phone:

Please note: The information on this form may be released to the applicant through Access to Information under the Freedom of Information and Protection of Privacy Act. If you wish the information to remain confidential, please indicate this here:

**Please send this completed Professional Reference Form to: [gradrefs@uvic.ca](mailto:gradrefs@uvic.ca) and [scycgrad@uvic.ca](mailto:scycgrad@uvic.ca) by **November 15, 2023**.**