A close up of a sign

Description automatically generated

Course Director: (Prof) Dr Denise Grocke, AO

PhD, RMT, RGIMT, FAMI,

**Professional Referee Form –Introductory Training**

**Name of Applicant:**

**How long and in what capacity have you known the applicant?**

**The applicant is applying for the Introductory course in Music and Imagery, which involves experiential sessions. Please comment on the applicant’s abilities in the following areas:**

**1 Relating to people**

**2 Clinical/therapeutic skills**

1. **Administrative and organizational skills**
2. **Capability in situations requiring flexibility and sensitivity**

**Are there any reasons why this applicant may not be suitable for experiential training at this time?**

**I recommend \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for the course**

**(name of applicant)**

**I do not recommend \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for the course**

**(name of applicant)**

**Name of Referee:**

**Title: Position:**

**Address:**

**Telephone:**

**Email:**

**Signature of referee:**

**Please note: This reference must be sent directly to:**

Denise Grocke, P.O. Box 7210, Beaumaris, Victoria, AUSTRALIA 3193

Or attached to an email: denisegrocke50@gmail.com

* **Applications close Wednesday March 31st, 2021. Applicants may be disadvantaged if referee forms are received late.**
* **Please do not send the reference form to the applicant**

**Thank you for completing this form**