**Confidential report on applicant for a Health Promotion Research Scholarship, Aboriginal Scholarship or Health Promotion Fellowship grant.**

**Report on applicant by nominated referrer:**

**The applicant is required to complete Part A of the below form and forward it to their nominated referees with a completed copy of the application. It is recommended the applicant and referee agree on a date for submission of this report to Healthway.**

**The referee must email this report directly to** [**research@healthway.wa.gov.au**](mailto:research@healthway.wa.gov.au)

**Part A**

|  |  |
| --- | --- |
| **Name of applicant** |  |
| **Institution** |  |
| **Project title** |  |

**Part B**

|  |  |
| --- | --- |
| **How long have you known the candidate for? (year/s)** |  |
| **How have you known the candidate (e.g., friend, student, colleague)?** |  |
| **What role have you played to this applicant (e.g., tutor, department head)?** |  |

**Part C**

**Please provide a brief written report to assist the selection committee in evaluating the candidate’s ability.**

**Briefly comment on the following areas:**

1. Candidate’s understanding of the area of study.
2. Ability of the candidate to communicate orally and in writing.
3. Candidate’s ability to understand and evaluate the scientific literature in the field.
4. Ability of the candidate to create and explore new ideas.
5. Knowledge and ability of the candidate to use basic research techniques.
6. Ability of the candidate to collaborate and engage with the nominated partner agency(s).
7. State the candidate’s main weaknesses and whether they are likely to affect his/her ability to complete the proposed research.
8. Relevance (in your opinion) of candidate’s research/study area to health promotion in Western Australia.

**(Do not exceed 3 pages)**

**Referee details**

Electronic signatures are accepted.

|  |  |
| --- | --- |
| **Name** |  |
| **Institution** |  |
| **Signature** |  |
| **Date of signature** |  |