Prescribed Form 1 Confidential Statement of Reference for Master Level

FOR the Employer/ Authorized Officer

The Project for Human Resource Development Scholarship (JDS) in Fiji 2025 CONFIDENTIAL STATEMENT of REFERENCE for MASTER LEVEL

This reference statement is to be completed by the applicant's supervisor. This should be typed in English. The Referee is requested to send it directly to the JDS Office (jdsfiji-1@jds21.com) via email, or the Referee can give it to the applicant in a signed and sealed envelope with the organisational stamp. Completed but not sealed Form 1 submitted by the applicant will NOT be accepted.

The	Name of	the Applicant:
To t	he referee:	This is an integral part of an application form for the scholarship program provided by Fiji under the Grant Aid Program by the Government of Japan. This program offers opportunities for academic research at Japanese higher educational institutions. Also this is to enhance the leadership skills of young government officials in Fiji so that they can contribute more effectively to their home country after completion of their respective studies. Your candid responses to the items below would greatly assist the selection.
1.	How long	g have you known the applicant and in what context?
2.	How do	you assess the applicant's personality?
	(Weaknes	SS)
3.	How do	you describe the applicant's competence and weakness in her/his work?
	(Weaknes	SS)
4.	-	you appraise the applicant's ability that s/he will fill upon her/his return to Fiji luties s/he will undertake?
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5. Please evaluate the applicant regarding the following items in comparison with other staff: Please tick only one on each item.

	Excellent	Good	Average	Poor	N/A
Academic Ability					
Knowledge of Specialty Field					
Motivation & Diligence					
Potential for Future Contribution in Specialty Field					
Leadership					
Emotional Maturity					
Communication Skill					
Skill in Maintaining Personal Relationship with others					
Adaptability to New Environment					

5.	Other recommendation remarks:
7.	Relevance of the applicant's research plan and her/his current work; (please tick only one check box from below)
	☐ Strongly relevant / ☐ somewhat relevant / ☐ not relevant
	Comments:
	Full Name of the Referee:
	Relationship to the Applicant:
	Name of Organization/ Department/ Division:
	Title:
	Phone No.:
	Signature:
	Date: (day)/(month)/(year)