

School Confidential Report Form

This report is confidential to the Selection Committee and is protected under Section 29 (ii) of the Privacy Act 1993. Referees please post or email the completed form to:

Email: teach@waikato.ac.nz

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THE UNIVERSITY OF
WAIKATO
Te Whare Wānanga o Waikato

FOR SCHOOL LEAVERS ONLY

>> APPLICANT'S DETAILS

Applicant's name _____ Date of birth _____

School _____

Application to the Bachelor of Teaching (BTchg) degree programme (tick as applicable):

☐ Early Childhood

☐ Primary

☐ Secondary

>> APPLICANT'S CRITERIA

Is the applicant likely to achieve University Entrance?

☐ Yes

☐ No

Qualifications e.g. NCEA, CIE	Subjects in current year	Level of study	Total credits likely to be achieved (if known)

Has the applicant achieved the literacy requirements for University Entrance?

☐ Yes

☐ No

☐ In progress

Has the applicant achieved the numeracy requirements for University Entrance?

☐ Yes

☐ No

☐ In progress

Is the applicant able to communicate clearly in both verbal and written contexts?

☐ Yes

☐ No

Does the applicant have the ability to succeed at independent study for the Bachelor of Teaching degree?

☐ Yes ☐ No

If yes, please indicate anticipated ability to succeed:

☐ only with concerted effort

☐ with some difficulty, though has necessary skills

☐ no anticipated difficulty

Does the applicant possess suitable personal qualities to become a teacher? Please indicate degree of suitability:

☐ not suitable

☐ suitable

☐ very suitable

☐ extremely suitable

I would like to add the following about the applicant:

>> REFEREE'S DETAILS

Referee's Name _____ Signature _____

Designation _____ Date _____

Phone _____ Email _____

Official school
stamp