

## APPRECIATION REPORT ON POST-GRADUATE APPLICANTS

### TO THE REFEREE :

Your name has been suggested as a referee by the under-mentioned applicant. We would greatly appreciate your completing this report to the best of your knowledge.

### I – THE APPLICANT

Name : \_\_\_\_\_ First name : \_\_\_\_\_

E-mail address : \_\_\_\_\_ Online application number : \_\_\_\_\_

Degree sought :  PhD  MScA  MEng  DESS  Short Graduate Programs (microprograms)

### II – RATINGS

I have known the applicant for : \_\_\_\_\_ years and/or \_\_\_\_\_ months.

I was his :  research supervisor  employer  professor  other \_\_\_\_\_  
(Specify)

#### A- Detailed

N.B. : In a group of 100 students of equal level, the applicant would rate as \_\_\_\_\_

1. intellectual capacity
2. knowledge acquired
3. judgment
4. initiative
5. perseverance
6. research ability
7. aptitude towards team work

Excellent 1 <sup>st</sup> 10%	Very good 1 <sup>st</sup> 15%	Good 1 <sup>st</sup> 25%	Fair 1 <sup>st</sup> 50%
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No sufficiently acquainted with applicant

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- B- Overall**
- The applicant's possibilities for success are excellent.
- The applicant's possibilities for success are average.
- The applicant's possibilities for success are slight.

Kindly insert, here under, any further remarks you may judge to be of help on the applicant's ability to carry out advanced studies and research :

In accordance with the *Act respecting Access to Documents Held by Public Bodies and the Protection of Personal Information*, CQLR, c. A-2.1, your opinion of the applicant may be accessible to him upon demand once Polytechnique has rendered its final decision, except if releasing this information could seriously harm you. This report:

- may be released** to the applicant without serious harm to my person / despite the serious harm this release could cause me.
- may not be released** to the applicant. This release would cause me serious harm because (justification mandatory) :

In the latter case, only section I of this report will be accessible to the applicant.

### III – THE REFEREE

Institution : \_\_\_\_\_  
(or Firm)

Title : \_\_\_\_\_

E-mail : \_\_\_\_\_

Referee's name (block letters) \_\_\_\_\_

Telephone number : \_\_\_\_\_

Fax : \_\_\_\_\_

Date : \_\_\_\_\_

(Referee's signature)

Please return this form to : Registrariat, Ecole Polytechnique of Montréal, C.P. 6079, Succ. Centre-Ville, Montreal (Que), Canada H3C 3A7

Or by e-mail at : [registraire.etudessuperieures@polymtl.ca](mailto:registraire.etudessuperieures@polymtl.ca)

The collected information will be used by the personnel of Polytechnique responsible for the review of the postgraduate application. The reply is optional; the application's review being conducted based on the information provided. This information will be kept in a confidential manner, in accordance to the *Act respecting Access to Documents Held by Public Bodies and the Protection of Personal Information*, CQLR, c. A-2.1. Under the terms of said Act, any person has the right to be informed of the existence of personal information concerning him, to obtain such personal information, and request for its correction, where applicable.