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CERTIFICATE IN TRAINING OF MUSLIM CHAPLAINCY

REFERENCE FORM

YEAR:

PLEASE USE BLOCK CAPITALS

This form should be given to your referee for completion and returned (in a sealed envelope) with your application form.

REQUEST FOR CONFIDENTIAL STATEMENT

Please write clearly or type the statement. This statement will be treated as strictly confidential unless you specifically give permission to disclose the contents. In your statement you should consider the following information about the candidate: **Suitability for the course; Intellectual qualities; Personal qualities; Ability to deal with people; Inter-personal skills; Experience of community work; Proficiency in English language (if applicant's first language is not English).**

CANDIDATE'S FULL NAME:

NAME OF REFEREE:.....

POSITION HELD:

ADDRESS:

.....POSTCODE:

TEL. NO. INCL. CODE: E-MAIL:

CONFIDENTIAL STATEMENT (use additional sheet if necessary):.....

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SIGNATURE: DATE:

The completed application form should be returned to the
Short Course Administrator, at the above address.