

Employee Reference Form

The purpose of this form is to verify that the applicant was employed, and the nature of the employment. This information is required to support a claim for additional points in gaining entry to the Professional Master of Education.

The applicant should complete the form in as much detail as possible. On completion and signed, please upload it your application.

The employer should check that the information is accurate and verify by signing and endorsing with an official stamp.

Applicants name	
Applicants address	
Application number	

Employer name	
Employer address	
Nature of employment/position	
Please be as specific as possible, highlighting how this employment is relevant to your degree and/or to working with young people	
Full time or part time	Full time <input type="checkbox"/> Part time <input type="checkbox"/>
Start and end dates	Start _____ End _____
Was this paid employment?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Signed: _____

Official Stamp