

Irish Clinical Academic Training (ICAT) Programme Academic Reference Form

| To the Applicant: | | |
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| Please complete Section A below and send two copies of the form to your two referees with the following filenames: - | | |
| applicant firstname_surname_ICATref1 | | |
| and | | |
| applicant firstname_surname_ICATref2 | | |
| ., | | |
| Two completed Academic Reference Forms must be received by ICAT by 1pm on Wednesday 17 th September 2025. | | |
| To the Referee: | | |
| Thank you for providing us with a reference for this Applicant to Irish Clinical Academic Training (ICAT) Programme. | | |
| Please complete this form to indicate the Applicant's academic suitability and potential to undertake postgraduate research as part of the Irish Clinical Academic Training Programme. | | |
| Please return the completed form by e-mail to admin@ICATprogramme.org . The completed form must reach ICAT by 1pm on 17 th September 2025. | | |
| For more information about the ICAT Programme please see www.icatprogramme.org . | | |
| Section A (to be completed by Applicant) | | |
| Name: | | |
| Contact Address: | | |
| Contact Address. | | |
| | | |
| | | |
| | | |
| Email Address: | | |
| Section B (to be completed by Referee) | | |
| Title and Name of Referee: | | |
| Contact Address: | | |



| Email Address: | | |
|--|----------------------------|--|
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| For how long and in what capacity do you know the applicant? | | |
| Please estimate in which of the following categories you would rank the candidate's relative academic abilities in comparison with others at the same level of training. Please place a tick $()$ in the relevant box. | | |
| Top 2% Top 5% Top 10% | Top 25% Other Specify | |
| What is the basis of this assessment? Official class ra | anking Personal assessment | |
| If the Applicant's first language is not English, please comment on their proficiency in the language: | | |
| | | |
| Out and the Annual Line | | |
| Statement of the Applicant's ability and potential by academic referee with recent knowledge of the Applicant's work: Where possible it would be helpful if referees commented on the Applicant's intellectual ability, initiative, | | |
| capacity for independent critical thinking, diligence, creativity in problem solving, inter-personal skills and ability to work as part of a team. | | |
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| Signed: (e-signature or type your name) | Date: | |
| Please return the completed form by email to admin@ICATprogramme.org before 1pm on 17 th September | | |
| 2025 | | |