# RGC Reference Number :

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| **RESEARCH GRANTS COUNCIL**  **POSTDOCTORAL FELLOWSHIP SCHEME (PDFS) Academic Referee’s Report Form**  **(CONFIDENTIAL)**  **General Notes:**   * Please fill in the ***RGC Reference Number*** at the top right corner of each page of this form. * One copy of this referee’s report should be forwarded to each of the nominee’s two referees\* for completion of Part B. * Referees should return their completed report directly to the nominating / supporting university named below before the Submission Deadline. * The report should be entirely written by the academic referee, who should return the completed report directly to the nominating / supporting university for inclusion of the report in the submission of nomination.   Nominating / Supporting university please provide contact information below, for referees to return a completed referee’s report directly to you by post / fax or e-mail (under confidential cover): | |
| Name of Nominating / Supporting University: |  |
| Address: |  |
| Fax: |  |
| E-mail: |  |
| Submission Deadline: |  |
| **\* *The two academic referees should be familiar with the nominee’s academic achievements and research ability. The referee’s report should be completed in English. Proposed supervisor(s) from the university above and persons from non-academic background are not considered as appropriate academic referees.*** | |

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| **RGC Reference Number :** |  |

# Part A Nominee’s Particulars *(to be completed by the nominating university)*

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| --- | --- | --- |
| Name of Nominee : | (Family name) | |
| (Given name) | |
| Recruiting Faculty / School / Department / Division / Unit : | |  |
| Choice of Research Field Area(s) : | |  |

**Part B Academic Referee’s Report *(to be completed by the referee)***

# Notes to Referees:

* The nominee named above is being nominated for the RGC Postdoctoral Fellowship Scheme (PDFS) by the nominating / supporting university named on Page 1.
* Please complete **Part B** of this report **in English** and **return a completed report directly to the nominating / supporting university** as detailed on Page 1.
* Please refrain from mentioning the name of the nominating / supporting university to enable blind review to be conducted.
* All information given here will be treated as strictly confidential. It will be accessible only to the PDFS Selection Panels and those who are responsible for processing this nomination within the named university and the Research Grants Council (RGC).
* Please provide genuine and sufficient information in the report to facilitate the Selection Panel in evaluating the nominee’s research ability and potential.
* All information submitted shall be handled in accordance with the requirements stipulated by the Personal Data (Privacy) Ordinance in Hong Kong.

1. How long and in what capacity have you known the nominee?

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| **RGC Reference Number :** |  |

1. How would you rate the following characteristics of the nominee?

***(Please tick as appropriate)***

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Excellent**  (top 5%) | **Very Good**  (top 6-20%) | **Good**  (top 21-50%) | **Average**  **or below** (lower than 50%) | **No basis**  **for judgment** |
| Intellectual capacity | □ | □ | □ | □ | □ |
| Ability for conducting scholastic research | □ | □ | □ | □ | □ |
| Knowledge of proposed research study | □ | □ | □ | □ | □ |
| Analytical power and reasoning | □ | □ | □ | □ | □ |
| Judgment | □ | □ | □ | □ | □ |
| Imagination and originality | □ | □ | □ | □ | □ |
| Motivation and perseverance | □ | □ | □ | □ | □ |
| Skills of writing and argumentation | □ | □ | □ | □ | □ |
| Capacity for independent work | □ | □ | □ | □ | □ |
| Reliability and sense of responsibility | □ | □ | □ | □ | □ |

1. Please describe the research ability and potential of the nominee, and explain any other dimensions of the nominee’s experience and skills that are relevant to PDFS.

(***Please refrain from mentioning the name of the nominating / supporting university since a blind review process may be involved*.** Please attach separate sheet(s) if more space is required.)

# RGC Reference Number :

1. What is your overall recommendation for the nominee to receive the PDFS Fellowship and work as a Postdoctoral Fellow?

Recommend very strongly

Recommend strongly

Recommend with reservation Do not recommend

|  |  |
| --- | --- |
| Name of Referee: | Title: |
| (in block letters) | (Prof / Dr / Mr / Ms / Mrs) |
| University / Organisation: | |
| Position: | |
| E-mail address: | |
| Postal address: | |
| Telephone Number#: | Fax Number#: |
| (# Please provide country code and area code, e.g. +86-10-1234567) | |

Signature: Date:

# Declaration: The nominating / supporting university has verified that this report is submitted directly by the referee listed above.

# This document is strictly CONFIDENTIAL. Please send it directly to the nominating / supporting university (under confidential cover) whose details are given on Page 1.