Referees, please forward the report to: NSNZ Registrar, [registration@nutritionsociety.ac.nz](mailto:registration@nutritionsociety.ac.nz)

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| --- | --- |
| **Applicant Name** |  |
| **Applicant Field/s of Expertise** |  |
| **Referee Name** |  |
| **Referee Professional Position** |  |
| **Referee phone** |  |
| **Referee Email** |  |
| **Professional competence**  *(Does the applicant display professional competence)* | Examples: uses evidence-based nutrition knowledge and expertise, demonstrates effective oral and written communication and interpersonal skills, *works only in their field/s of competence or scope of practice, represents themselves honestly.* |
| **Standing in their profession**  *(Does the applicant display integrity and professionalism in their work)* | *Examples: well respected in community, enhances reputation of the NSNZ, upholds client welfare, respectful of colleagues.* |
| **Experience in their field**  *(Does the applicant have suitable experience in their field/s of expertise they have applied for)* | *Example: has suitable qualifications and work experience in their field/s of expertise.* |
| **Overall recommendation**  *Would you recommend the applicant be accepted as a Registered Nutritionist?* |  |

**Signed: Date:**