**Sport & Exercise Psychology Accreditation Route**

**Client reference**

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| **Name of Candidate for Whom the Reference is provided:** |
| **Name of Referee:** | **Position of Referee:** |
| **Please provide details of the capacity within which you know/work with the candidate** (Please include a guide towards the quantity and type of work that you can vouch for). |
| **Please comment on your judgement of where you consider the candidate’s area of expertise to be** (For example whether you have worked in a *sport* and/or *exercise* capacity and the specific roles that the applicant played during this time). |
| **Please comment on the candidate’s ability to operate autonomously as a sport and/or exercise psychologist in a manner which is safe and fit to practice.** |
| Please provide any further comments you may have regarding the candidate with whom you have worked (or had experience). |

**Signature of Referee:**

**Date:**