

**FEEDING OUR FUTURES COMMUNITY PARTNERSHIPS  
REFEREE REPORT**

**TO THE APPLICANT**

Please supply this form to the referee with a copy of your completed application. Referees are your local HEHA Project Manager or the relevant person from the District Health Board in your region.

The referee completes this form and **posts it directly** to Feeding Our Futures. The referee does not return the completed form to you; they send it straight to us. You still need to send your completed application to Feeding Our Futures by the closing date. Please note that Feeding Our Futures reserves the right to make the final decision.

Please complete the following before giving to your referee:

**Name of event/initiative:**

**Name of organisation running the event/initiative:**

**Name of contact person:**

**TO THE REFEREE**

The organisation seeking this reference has applied to the Feeding Our Futures Community Partnerships Programme as described in the attached application form. Your advice and comments are appreciated and held in confidence – they will not be divulged to the applicant.

This referee form and a copy of their application should reach you by Friday 14 November 2008 to allow you adequate time to complete the form. Please forward the completed referee form to Feeding Our Futures **by Friday 21 November 2008**.

**Please complete this form and post or email it to:**

By post: Feeding Our Futures Community Partnerships  
Health Sponsorship Council, PO Box 2142, Wellington 6140  
Or email: erik@hsc.org.nz

**Please tell us your assessment of the applicant's ability to undertake the project they describe in their application, or any other comments you consider relevant to the sponsorship grant being sought.**

**Assessment/comments continued:**

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**Referee's contact details:**

Full name:	
Signature:	
DHB name:	
Position/role:	
Date:	

**Can Feeding Our Futures contact you regarding this reference?**

Yes, contact me on .....

No