

## **Student Referee Letter.**

Reference Number:
THIS LETTER MUST ONLY BE COMPLETED BY ACADEMICS FROM CURTIN UNIVERSITY OF THE UNIVERSITY OF
SYDNEY'S SEXOLOGY/SEXUAL HEALTH MEDICINE PROGRAMS
Applicant's Name:
I,, know the applicant as they are a current student
within my unit(s) and believe that the applicant does:
1. Act with integrity, confidentiality and in good faith;
2. Respect human rights, dignity, fairness and justice;
3. Have sensitivity and respect for others' beliefs, values and opinions;
4. Show commitment to applying ethical principles to learning and practice; and
5. Have sound verbal, listening, and empathy skills.
I therefore see no circumstances, actions, or issues that would indicate that the applicant is not suitable for
engagement within the field of sexology/psychosexual therapy/sexuality education. Please take this letter and
associated reference number as confirmation that I recommend the above applicant for Student Membership
of the Society of Australia Sexologists Ltd.
Signed:
Date: