**You have been asked to provide a reference for the following individual in their application to be granted INCOSE Certified Systems Engineering Professional (CSEP) status. Your input is vital to the INCOSE evaluation. INCOSE will not provide any information in your response back to the applicant, to protect your privacy. You may provide a copy of your response to the applicant, if you wish.**

|  |
| --- |
| **APPLICANT DETAILS** |
| **Applicant Given Name(s)** | **Applicant Family Name** | **Applicant INCOSE Membership Number** |
|  |  |  |

|  |  |
| --- | --- |
|  | **REFERENCE DETAILS** |
|  | **Please enter your name below** |
| **Reference Number from Application** | **Reference Given Name(s)** | **Reference Family Name** | **Reference INCOSE Membership Number (if applicable)** |
|  |  |  |  |

|  |
| --- |
| **Reference Qualifications** |
| **This section is designed to confirm to INCOSE reviewers that you are qualified as a reference for the applicant above.****Please answer the questions below:** |
| **Are you INCOSE Certified at any Level? Yes [ ]  No [ ]  If yes, enter level****Are you an INCOSE Fellow? Yes [ ]  No [ ]**  |
| **During what period did you have personal knowledge of the applicant’s Systems Engineering work?**  |
| **From (MM/YY)       To (MM/YY)** |
| **Describe your busines connection with the applicant during this period (example: “I was her immediate supervisor.”):**  |
|  |
| **Name of Present Business / Agency / Institution:**  |
|  |
| **Current Job Title:**  |
|  |
| **Please describe your own (not the applicant’s) experience or exposure to systems engineering during your career in the box below. Provide information on the type of work performed, not just job titles. This box expands to accommodate your text. Most references use multiple paragraphs to complete this section.** **If you have stated above that you are an INCOSE CSEP, ESEP, or Fellow you may leave this box blank.** |
|  |

|  |
| --- |
| **Applicant Competencies requiring your validation** |
| **You should have received an Applicant Competency Statement with this form. The statement covers work the applicant claims to have performed in several competency areas.****The applicant has requested you confirm this by initialing all statements you know to be true for the competency areas identified below in their statement. You should not validate areas other than those identified below.** ***NOTE:******References should only initial applicant statements they personally can confirm, having known the candidate and their work during the time period when the described work was performed. If you need to clarify or caveat any of the areas you have initialled, please use the “Reference Additional Statement” box below to do this.*** |
| **Competence Area:** | **NOTE: At least one of these boxes should have been completed by the Applicant prior to sending out this form. *If you are a reference who receives this form and these boxes are all blank, please contact the applicant for details.*** |
| **Competence Area:** |
| **Competence Area:** |
| **Competence Area:** |
| **Competence Area:** |
| **Competence Area:** |

|  |
| --- |
| **Reference Additional statement on addendum submission (OPTIONAL).**  |
| **References may optionally use the space below to add any clarifying or additional comments regarding the areas they have initialled on the candidate’s application form.** |
|  |

|  |
| --- |
| **Affidavit by Reference** |
| **I, the undersigned, have read the contents and information in this form and in the application where I have initialled. I certify on my honor that the statements I have initialled and any additional statement made above by myself are true and correct to the best of my knowledge and belief and are made in good faith.****Accept Affidavit: Yes [ ]  No [ ]**  |
| **Reference Signature:****(Typed Name Is Accepted as Signature for electronic applications)** |
| **Date:** |