mid-america
REFORMED SEMINARY
229 Seminary Drive
Dyer, IN 46311
p. 219.864.2400
f. 219.864.2410

pastor's reference

Applicant Information *(to be filled out by the applicant)*

Name: _____

Address: _____

Number, Street, and Apt # | City | State/Province | Zip/Postal Code | Country

Degree being pursued: ☐ Master of Divinity ☐ Master of Theological Studies

Notice: The Family Educational Rights and Privacy Act of 1974, as amended, gives students the right to review their official educational records, including letters of recommendation. You may waive your right to view this recommendation by signing below. Signing the waiver is not a requirement for admission.

Waiver: By signing this waiver, I hereby voluntarily waive any right or privilege provided by the Family Educational Rights and Privacy Act of 1974, as amended, to inspect or challenge the contents of this letter of recommendation. I expect this letter of recommendation to remain confidential between the writer and the person or organization receiving the recommendation.

_____

Signature | Date

A member of your congregation has applied for admission to Mid-America Reformed Seminary to pursue the degree indicated above.

As the admissions committee attempts to assess the spiritual gifts and abilities of the applicant we will appreciate your comments and insights. As the applicant's pastor, you are in the best position to provide the kind of information which will be most useful to us.

We appreciate your thoughtful evaluation and ask that you give special attention to the following areas:

- spiritual growth
- gifts
- qualities of leadership
- weaknesses

Please make any comments concerning the applicant that would help us in considering admissibility.

Please note the provisions of the Family Educational Rights and Privacy Act of 1974, as amended, listed above. If the student has not signed the waiver, it is possible he/she will request and receive permission to review this material in the presence of his/her faculty advisor. The submitted information will be used by the Seminary only and is requested in order to prepare the student's admissions profile.

Please address the areas listed above in a separate document and attach it to this sheet.

Information about the Reference *(to be filled out by the pastor)*

Pastor's Name: _____

Phone Number

Church Name & Address: _____

_____

Signature | Date

After completing this form, please mail it to the Registrar at Mid-America Reformed Seminary or email to apply@midamerica.edu.