

229 Seminary Drive Dyer, IN 46311 p. 219.864.2400 f. 219.864.2410

General	Reference - Mast	er of Divinity			
Applicant Ir	nformation (to be filled out by the a	pplicant)			
Name:					
Address:					
	Number, Street, and Apt #	City	State/Province	Zip/Postal Code	Country
	ly Educational Rights and Privacy Act of on. You may waive your right to view t				
to inspect or chal	ng this waiver, I hereby voluntarily waiv. lenge the contents of this letter of reco zation receiving the recommendation.				
Sigr	nature			Date	
	committee would appreciate yo				ıdy.
lease state you pplicant):	r relationship with the applican	it (we ask you serve as a r	reference only if you are	e not in a familial re	lationship to the
Characteristi	CS				
	us characteristics that may affec yths and weaknesses by checkin		0	-	plicant, indicatin

	Not Observed	Weak	Fair	Good	Excellent
Commitment to Christ					
Christian Character					
Ability to Accept Criticism					
Academic Aptitude					
Creativity					
Dependability					
Emotional Stability					
Initiative					
Leadership					
Interpersonal Skills					
Physical Health					
Marital Relationship					
Fiscal Responsibility					

Comments

Reference Address: Street Address Title:			
Reference Address:Street Address	City		
		State/Province	Zip/Postal Code
		Phone	Number
Reference Name:			
Information about the Reference (to be filled out by the	recommender)		
☐ Please contact me for further information			
☐ I do not recommend this applicant			
$\ \square$ I recommend this applicant with reservations			
\square I recommend this applicant			
$\hfill \square$ I recommend this applicant with enthusiasm			
n summary,			
o you have any additional comments?			
What areas in the applicant's life need improvement?			
	,		
What potential does this applicant have for effectiveness in	ministry?		
That is your overall evaluation of the applicant?			