

WESTERN THEOLOGICAL SEMINARY

CONFIDENTIAL INFORMATION ON APPLICATION FOR ADMISSION TO DISTANCE LEARNING - MASTER OF DIVINITY PROGRAM

TO THE APPLICANT

Fill in your name and sign in the space indicated. Forward this form to the recommender for completion. Ask the recommender to send the form directly to Western Theological Seminary. For the convenience of the recommender, include a stamped, addressed envelope.

NAME (Print) _____
(Last) (First) (Middle)

ADDRESS _____

I agree that the recommendation I am requesting shall be held in confidence by officials of Western Theological Seminary, and I hereby waive any rights I may have to examine it.

Applicant's Signature _____

TO THE RECOMMENDER

Western Theological Seminary appreciates your confidential statement evaluating this applicant. You may use a separate sheet for your answers and attach it to this form.

1. How long and in what connection you have known the applicant?

2. Assessment

Please evaluate the applicant in the following areas by circling the appropriate response:

	4 = Excellent	3 = Good	2 = Average	1 = Poor	N = Not Observed		
a. Leadership Potential			4	3	2	1	N
b. Emotional Stability			4	3	2	1	N
c. Academic Ability	4		3	2	1	N	
d. Spiritual Maturity			4	3	2	1	N
e. Ability to Communicate			4	3	2	1	N
f. Interpersonal Relationships			4	3	2	1	N
g. Initiative			4	3	2	1	N
h. Perseverance			4	3	2	1	N
i. Self-Directed			4	3	2	1	N

3. How would you summarize this candidate's strengths?

4. How would your summarize this candidate's growth areas?

5. Please comment on his/her capacity for theological study and ministerial leadership.

6. Please state anything concerning the applicant that makes you hesitant to recommend this person.

7. Overall, do you recommend this applicant for admission to Western Theological Seminary?
 - Recommend with enthusiasm
 - Recommend
 - Recommend with reservation
 - Do not recommend

If you chose not to recommend the applicant, please indicate reason(s) if not covered in responses to questions 1-6.

Name of Recommender (Print) _____ Date _____

Address _____

City/State/Zip _____

Telephone Home (____) _____ Office (____) _____

E-mail Address _____

Signature of Recommender _____

DO NOT RETURN TO THE APPLICANT

Please mail directly to: Office of Admissions
 Western Theological Seminary
 101 East 13th Street
 Holland, MI 49423

www.westernsem.edu
 Phone: 800.392.8554
 616.392.8555
 Fax: 616.392.7717