

REFERENCE



PART 1: TO BE COMPLETED BY APPLICANT

After completing this section, please deliver this form to a leader from your church (e.g. a pastor, elder, youth leader, etc.). Remind him or her to complete and return this form to Emmaus as soon as possible.

Applicant's Name _____

Address _____

City _____ **State** _____ **ZIP** _____

Phone Number (_____) _____ - _____ **Email** _____

I hereby waive my right to access to any information contained on this recommendation form and agree that the statement shall remain confidential. Yes No

Applicant's Signature _____ **Date** _____

PART 2: TO BE COMPLETED BY A CHURCH LEADER

How long have you known the applicant and what is your relationship? _____

Do you believe the applicant is a Christian? Yes No **Please explain** _____

How would you describe the applicant's involvement in church life?

Active involvement Average involvement Passive involvement Unknown

How would you describe the applicant's involvement in school life?

Active involvement Average involvement Passive involvement Unknown

Describe any strengths or weakness in the applicant's character as you perceive them _____

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CONTINUED FROM OTHER SIDE

| | | | |
|--|---------------------------------|-------------------------------|--|
| How would you describe the applicant's interest in education? | <input type="checkbox"/> Strong | <input type="checkbox"/> Fair | <input type="checkbox"/> Needs Development |
| How would you describe the applicant's personal maturity? | <input type="checkbox"/> Strong | <input type="checkbox"/> Fair | <input type="checkbox"/> Needs Development |
| How would you describe the applicant's ability to cooperate? | <input type="checkbox"/> Strong | <input type="checkbox"/> Fair | <input type="checkbox"/> Needs Development |
| How would you describe the applicant's ability in leadership? | <input type="checkbox"/> Strong | <input type="checkbox"/> Fair | <input type="checkbox"/> Needs Development |
| How would you describe the applicant's record in reliability? | <input type="checkbox"/> Strong | <input type="checkbox"/> Fair | <input type="checkbox"/> Needs Development |
| How would you describe the applicant's motivation? | <input type="checkbox"/> Strong | <input type="checkbox"/> Fair | <input type="checkbox"/> Needs Development |
| How would you describe the applicant's emotional stability? | <input type="checkbox"/> Strong | <input type="checkbox"/> Fair | <input type="checkbox"/> Needs Development |
| How would you describe the applicant's concern for others? | <input type="checkbox"/> Strong | <input type="checkbox"/> Fair | <input type="checkbox"/> Needs Development |
| How would you describe the applicant's academic ability? | <input type="checkbox"/> Strong | <input type="checkbox"/> Fair | <input type="checkbox"/> Needs Development |
| How would you describe the applicant's social interaction? | <input type="checkbox"/> Strong | <input type="checkbox"/> Fair | <input type="checkbox"/> Needs Development |
| How would you describe the applicant's respect for authority? | <input type="checkbox"/> Strong | <input type="checkbox"/> Fair | <input type="checkbox"/> Needs Development |
| How would you describe the applicant's ability to communicate? | <input type="checkbox"/> Strong | <input type="checkbox"/> Fair | <input type="checkbox"/> Needs Development |

Would you recommend the applicant for study at Emmaus Bible College?

Recommend Recommend with reservations Do not recommend

Do you have further comments that would help us evaluate this student's application? _____

Would you like us to contact you further to discuss this applicant?

Yes No Contact me if you wish

REFERENCE FORM SUBMITTED BY (please print):

Full Name _____ Title _____

Name of Church _____

Phone Number (_____) _____ - _____ Email _____

Address _____

City _____ State _____ ZIP _____

Please mail this reference to:

Emmaus Bible College
Office of Admissions
2570 Asbury Road
Dubuque, IA 52001

