

# Palmer Theological Seminary

## REFERENCE FORM

**Name of Applicant** \_\_\_\_\_

To the Evaluator: The person named above has applied for admission to Palmer Theological Seminary. Please evaluate the applicant by completing this form. **Note**: A close relative may not be chosen as a reference.

If the applicant is accepted for admission to Palmer, your reference may serve as a baseline for mentor/colleague feedback, and may become part of the student's file in the Office of Student Formation. Since realistic feedback is essential to genuine growth, we appreciate your candor. Please use separate sheets as necessary.

There are several characteristics/qualities that could affect both the applicant's success as a seminary student and his or her subsequent ministry.

**Please check the appropriate box for each characteristic/quality:**

CHARACTERISTIC/QUALITY	UNABLE TO JUDGE	WEAK	AVERAGE	STRONG
Committed to Christ				
Has vibrant, growing faith				
Committed to Christian Community				
Able to think critically				
Willing to learn from others				
Has leadership ability				
Takes initiative				
Relationally comfortable & appropriate				
Compassionate				
Open & vulnerable				
Listens to & hears others				
Interacts constructively with diverse views				
Willing to accept constructive feedback				
Able & willing to be self-reflective				
Cooperative & collegial				
Dependable				
Emotionally stable				
Affirms self & others				
A person of integrity				
Able to balance competing personal and professional demands				
Sets clear & appropriate boundaries				

(OVER)

1. How long have you known the applicant, and in what capacity?
  
2. How recently have you had significant contact with the applicant?
  
3. **RECOMMENDATION**: Please check the appropriate boxes.

	<b>NOT RECOMMENDED</b>	<b>RECOMMENDED</b>	<b>HIGHLY RECOMMENDED</b>
<b>Potential as a Student</b>			
<b>Potential for Ministry</b>			

\*Explanatory comments about the applicant's characteristics and qualities, your recommendation, and other issues are welcome.

Declaration:

I attest this is my best assessment of the applicant as I know him or her.

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Date \_\_\_\_\_

Email \_\_\_\_\_

Church/Institution

Position \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City

State

Zip

**Please mail, email or fax to:**

**Admissions Office**

**Palmer Theological Seminary, 1300 Eagle Road, St. Davids, PA 19087**

**FAX: 484-654-3680**

**[semadmis@eastern.edu](mailto:semadmis@eastern.edu)**