

Student Information *(To be completed by applicant)*

Print **your name and address** in the space below and give this form to the person providing a reference. This should be an individual who is familiar with your character, professional conduct and potential readiness for Corban University School of Ministry. This should be someone who has known you for at least **one year** and **is not a relative**.

Last	First	Middle	
Address	City	State	Zip

I waive my right to review this form once submitted to Corban University.

Program I am applying for:

<input type="checkbox"/> Certificate of Biblical Leadership	<input type="checkbox"/> Master's in Christian Leadership
<input type="checkbox"/> Master of Divinity	<input type="checkbox"/> Doctor of Ministry

Recommendation *(To be completed by reference)*

The individual whose name appears above is required to provide a reference prior to being admitted to Corban University School of Ministry. Applicants are admitted on the basis of academic, professional and personal qualities; therefore, your evaluation is appreciated.

If you need additional space for any of the questions below, please use a separate piece of paper and attach it to this form.

1. How long have you known the applicant and in what capacity? *(Be specific)*

2. Please evaluate the applicant's qualifications by checking the appropriate box.

Superior Above Average Average Below Average Not Observed

- Concern for Others
- Clarity of Oral and Written Expression
- Willingness to Consider New Ideas
- Emotional Stability and Maturity
- Ability to make Good Judgments
- Leadership Ability
- Willingness to Receive Instruction
- Personal Integrity
- Ability to Work With Others
- Integration of Spiritual Values & Life Objectives
- Dependability
- Academic Ability
- Financial Responsibility

3. How do you perceive the applicant's potential for effectiveness in ministry? Or, if the applicant is already serving in vocational ministry how do you rate their current effectiveness?

4. How do you perceive the applicant's potential for success in seminary?

5. Is the applicant married? Yes No If yes, how would you evaluate his/her marriage relationship?

6. Does the applicant demonstrate ethical standards and moral conduct, including conduct with the opposite sex, which would be expected of a leader in vocational Christian ministry? Yes No If no, please explain.

7. What are the strengths and weaknesses of the applicant? Include any information which would be helpful in our evaluation. Your comments could include recent experiences or incidents in the applicant's life, or even a general personality appraisal.

8. Do you recommend this applicant for admission to Corban University School of Ministry?

Highly Recommend Recommend Recommend with Reservations Do Not Recommend

Evaluator's Name _____ Phone (_____) _____

Address _____ Email _____

City _____ State _____ Zip _____

Position or Occupation _____ Employer or Organization _____

Church _____ Leadership Position _____

May we contact you if we need clarification concerning this form? Yes No

I am a graduate of Corban University Other _____

Signature _____ Date _____

Please Return to:

CORBAN UNIVERSITY

OFFICE OF GRADUATE & ONLINE ADMISSIONS

5000 Deer Park Drive SE | Salem, OR 97317-9392
800-764-1383 | 503-589-8195 | Fax 503-585-4316