

Recommendation for Admission

to Boyce College

Applicants Name
/ /
Date of Birth

This form is confidential and will become the property of SBTS and will not be returned to the student. Should the applicant be denied or otherwise not enroll, SBTS is under no obligation to disclose the contents of the application to the applicant, nor will SBTS release any information to a party legally unrelated to SBTS unless required to do so.

To be completed by Recommender (family members are not acceptable)

Please print legibly.

Recommender's name _____ E-mail address _____

Recommender's address _____

Recommender's job title _____ Telephone number (_____) _____

How long have you known the applicant? _____

How do you know the applicant? _____

Please indicate your understanding of the applicant's ministerial goals _____

Please evaluate the applicant in the following areas. Make comments on the back of this sheet for any Below Average or Poor responses. Feel free to use that space for any other comments as well.

	Outstanding	Above Average	Average	Below Average	Poor	No Information
Character (person of moral and spiritual integrity)	5	4	3	2	1	N
Judgment	5	4	3	2	1	N
Emotional stability	5	4	3	2	1	N
Maturity	5	4	3	2	1	N
Commitment to church-related vocation	5	4	3	2	1	N
Potential for effective ministry	5	4	3	2	1	N
Skill in relating to others	5	4	3	2	1	N
Financial responsibility	5	4	3	2	1	N
Spouse/family relations	5	4	3	2	1	N
Academic/intellectual abilities	5	4	3	2	1	N
Leadership potential	5	4	3	2	1	N

Please complete other side

Do you know of any physical, mental or emotional problems which might hinder effective work in Christian ministry?

yes no If yes, please elaborate.

Do you know of any physical, mental or emotional problems which might hinder the applicant's academic progress?

yes no If yes, please elaborate.

Do you know of any personal habits (sexual behavior, drug/alcohol use) or personal prejudices which might hamper service in a church-related position?

yes no If yes, please elaborate.

How do you perceive the attitude of the applicant's spouse/fiancé toward seminary education and vocational Christian ministry?

Very positive Positive, with some reservations Neutral Negative

Not applicable Please elaborate _____

Do you recommend this person for admission? yes no If yes, please check one:

With confidence With some reservations With reluctance

What characteristics do you consider to be the greatest strengths or talents of the applicant?

What characteristics do you consider to be the greatest weaknesses of the applicant?

Additional Comments: _____

Recommender's Signature

Date

Thank you for your thoughtful responses. Please return this form to:

Admissions Office
The Southern Baptist Theological Seminary
2825 Lexington Road
Louisville, Kentucky 40280