



# RECOMMENDATION FORM

This form is to be filled out by a professor, employer, professional or personal acquaintance. It should not be filled out by a member of your family.

### APPLICANT INFORMATION

Applicant Name: \_\_\_\_\_

Program: \_\_\_\_\_

Applicant Phone Number: \_\_\_\_\_

Applicant E-mail: \_\_\_\_\_

### Portland and Online Campuses, Seattle Teaching Site

ATTN: Enrollment Office  
5511 S. E. Hawthorne Blvd.  
Portland, OR 97215-3367  
503.517.1800 or 877.517.1800  
FAX: 503.517.1801

### San Jose Campus

ATTN: Enrollment Office  
1000 S. Park Victoria Drive  
Milpitas, CA 95035  
408.356.6889 or 877.900.6889  
FAX: 408.668.2800

### Sacramento Campus

ATTN: Enrollment Office  
290 Technology Way, Ste. 200  
Rocklin, CA 95765  
916.488.3720 or 800.250.7030  
FAX: 916.488.3735

Recommender's name (please print)

E-mail

Address

Daytime phone

Organization/Position

Western alumnus? (year)

### Please comment on each of the following areas:

1. Length and nature of your relationship with the applicant.
2. The applicant's character and demonstrated concern for others.
3. The applicant's emotional stability and social sensitivity.
4. The applicant's relationship and attitudes towards peers, supervisors, and subordinates (same gender and cross-gender).
5. The applicant's ability to set and achieve goals. What do you perceive to be his or her goals?

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6. The applicant's commitment to Christ and the work of the gospel as seen in his/her present involvement.

7. Do you have any reservations about this person's ability to do graduate work at the master's level?

8. Do you think this program will positively or negatively affect the applicant's marriage or family life?

9. Do you know of any occasion where this person has been accused, disciplined, or dismissed for moral/ethical or legal reasons? Please elaborate.

In consideration of the applicant's suitability for seminary study and overall potential for ministry, please check one of the following:

I do not recommend    I recommend with reservation    I recommend    I highly recommend

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Signature (required)

Date

Would you like us to call you for a telephone conversation about this applicant?  Yes  No need

Any other comments?

**Please return this form to the appropriate campus.**