

DIVINITY SCHOOL RECOMMENDATION

PLEASE PRINT NEATLY THIS PORTION TO BE COMPLETED BY APPLICANT

LAST NAME OF APPLICANT <i>Internationals: Passport Surname</i>	FIRST <i>First Name Added by Parents</i>	MIDDLE/MAIDEN <i>Other Names Added by Parents</i>
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ADDRESS	ANTICIPATED PROGRAM OF STUDY
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This recommendation is from a (check one):
 Pastor/Church Leader Professional acquaintance Teacher/Professor
 Lay Leader Employer Ministry supervisor/Colleague Other _____

NOTE: This form is to be filled out by someone who is not a member of your immediate family.

Under the Family Education Rights and Privacy Act of 1974 (Buckley Amendment), which gives students the right to inspect and review their education records, students may waive their right to see specific confidential statements and letters of recommendation. In the belief that applicants and the persons from whom they request evaluations may wish to preserve the confidentiality of those evaluations, we are giving you an opportunity to sign one of the following statements.

I waive my right to examine this form. I do not waive my right to examine this form.

APPLICANT'S SIGNATURE	DATE
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THIS PORTION TO BE COMPLETED BY RECOMMENDER

The individual named above is applying for admission to Trinity Evangelical Divinity School. Please note the provisions of the Family Education Rights and Privacy Act of 1974 as indicated above, which gives the applicant the right to review the contents of this recommendation unless that right to do so has been waived by signing the above. Thank you for your part in this important phase of the applicant's life.

Trinity Evangelical Divinity School offers professional and academic programs to equip men and women for worldwide ministry in the service of Christ. You can best serve this applicant by writing specific evidences of character and spiritual maturity, as well as strengths and weaknesses that you have personally observed in his or her life. **If you feel that you do not know the applicant well enough to give specific examples, please decline writing this recommendation.** Your responses carry significant weight, and we appreciate your careful attention. Your recommendation may also be used for scholarship evaluation. Please attach additional pages if necessary.

1. How long have you known the applicant? _____

How well? Very well Rather well Casually Not well

In what capacity? _____

2. If you are a professor, in how many of your courses has the applicant enrolled? _____

Undergraduate Graduate

3. In view of your knowledge of the applicant, please share your assessment of him or her in the following categories.

	NOT OBSERVED	WEAK	FAIR	AVERAGE	VERY GOOD	OUTSTANDING
Emotional stability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Self-discipline	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fruitfulness in ministry	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Commitment to the local church	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Spiritual vitality and growth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Servant attitude	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Intellectual ability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Responsibility with finances	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

PLEASE COMMENT ON THE FOLLOWING WITH SPECIFIC EXAMPLES (USE A SEPARATE PAGE IF NECESSARY):

ACADEMIC

- 4. Aptitude for proposed degree program

- 5. Ability to express ideas in writing in English

- 6. Verbal ability to communicate in English

RELATIONAL

- 7. Ability to relate to others (including teamwork and capacity for leadership)

- 8. Reputation with others

CHARACTER

- 9. Consistency between private & public life

- 10. Conformity of applicant's life to his or her Christian testimony

OTHER AREAS

- 11. Applicant's gifts & abilities

- 12. Areas in which applicant needs improvement

- 13. Do you see this person as someone you would hire, have as your pastor or church staff member, or like to work with as a colleague? Yes No Unsure Please comment:

<p>PHD APPLICANTS ONLY</p> <p>14. Do you believe that the candidate has the intellectual ability, energy, and perseverance necessary of PhD studies? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unsure</p> <p>15. How would you rate the candidate to other PhD students in the same field? <input type="radio"/> Superior <input type="radio"/> Comparable <input type="radio"/> Inferior <input type="radio"/> Unsure</p>
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SUMMARY (ALL APPLICANTS)

- 16. Recommendation for admission to Trinity Evangelical Divinity School (required):
 Highly recommend Recommend Recommend with reservations Do not recommend
- 17. I certify that the information given in this recommendation is accurate to the best of my knowledge.

_____ YOUR NAME (PLEASE TYPE OR PRINT)		_____ SIGNATURE	_____ DATE
_____ POSITION		_____ ORGANIZATION/ CHURCH	_____ TIU ALUMNUS? <input type="radio"/> Yes <input type="radio"/> No
_____ ADDRESS			
_____ CITY	_____ STATE/PROVINCE	_____ ZIP/POSTAL CODE	_____ COUNTRY
_____ DAY PHONE	_____ EVENING PHONE	_____ EMAIL	_____ FAX

Send to: Admissions Office
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