



Letter of Reference - Professional

To the Applicant: PRINT your name and address on the lines below. Then give this form to your reference (past or current employer, a professor or some one that has provided oversight to you in the past). If you are applying to the D.Min. program, this reference must be completed by a Professor.

Note: Family members are not eligible to serve as references.

Applicant: Name: _____

Address: _____

City: _____ Prov/State: _____

Country: _____ Postal Code: _____ Telephone: (____) _____

Note to the Referee:

Please complete this form, commenting on those areas where you have a knowledge of the applicant. Send the form directly to the Providence Seminary Admissions Office. **Please do not give the form back to the applicant.** This reference will remain confidential. The applicant has waived the right to see the completed reference.

1. How long have you known the applicant and in what capacity? _____

2. If you are a professor, how many courses has the applicant had with you? _____

3. How well do you know the applicant? Very Well Well Casually

4. Comment briefly on the applicant's personality and character as you have observed it. _____

5. Describe your understanding of the applicant's ability to perform academic work _____

6. How do you think the applicant will benefit from ministry training at Providence Theological Seminary?

Cut Here

Intellectual Ability	Not Observed	Weak	Fair	Good	Very Good	Outstanding
Analytical Ability	Not Observed	Weak	Fair	Good	Very Good	Outstanding
Creative Ability / Response to New Ideas	Not Observed	Weak	Fair	Good	Very Good	Outstanding
Initiative	Not Observed	Weak	Fair	Good	Very Good	Outstanding
Interpersonal Skills / Ability to Work with Others	Not Observed	Weak	Fair	Good	Very Good	Outstanding
Sensitivity to Needs of Others	Not Observed	Weak	Fair	Good	Very Good	Outstanding
Written Communication Skills	Not Observed	Weak	Fair	Good	Very Good	Outstanding
Oral Expression	Not Observed	Weak	Fair	Good	Very Good	Outstanding
Quality of Work	Not Observed	Weak	Fair	Good	Very Good	Outstanding
Leadership Skills	Not Observed	Weak	Fair	Good	Very Good	Outstanding
Personal Maturity	Not Observed	Weak	Fair	Good	Very Good	Outstanding
Emotional Stability	Not Observed	Weak	Fair	Good	Very Good	Outstanding
Aptitude for Chosen Ministry	Not Observed	Weak	Fair	Good	Very Good	Outstanding
Ability to Relate to Persons in Authority	Not Observed	Weak	Fair	Good	Very Good	Outstanding

Check one: I recommend with enthusiasm
 I recommend with this reservation _____
 I do not recommend

Referee: Name: _____
Address: _____
 Street or Box Number City Province/State Postal/Zip Code
Telephone: () Email: _____
Company/School: _____ Position: _____
Signature: _____ Date Signed: _____

Additional comments may be included on a separate piece of paper.

I would like to receive information about (please check all applicable):

Providence University College Providence Theological Seminary English Language Institute

Please return completed form to:

Admissions Office
Providence Theological Seminary
10 College Crescent
Otterburne, MB R0A 1G0
Canada

Toll Free: (800) 668-7768
Fax: (204) 433-7158
Email: info@prov.ca
Web: providenceseminary.ca