

STUDENT REFERENCE FORM



PROGRAM

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REQUEST INFO



* PLEASE PROVIDE YOUR FULL NAME:

* PLEASE VERIFY THE E-MAIL ADDRESS WHERE YOU RECEIVED THIS LINK:

* WHAT TYPE OF REFERENCE ARE YOU PROVIDING?

- Academic
- Personal
- Church Endorsement (Pastor ,Clerk of Session, or Chair of Board)

* WHAT IS THE NAME OF THE APPLICANT FOR WHOM YOU ARE SERVING AS A REFERENCE?

* HOW LONG HAVE YOU KNOWN THE APPLICANT?

* IN WHAT CAPACITY?

* WHAT IS YOUR OCCUPATION?

* WHAT ARE YOUR IMPRESSIONS OF THE APPLICANT'S CHARACTER, AIMS, AND VALUES? WHAT DO YOU PERCEIVE TO BE THIS PERSON'S ACADEMIC PROMISE AND INTELLECTUAL ABILITY?

* WHAT IS THE QUALITY OF THE APPLICANT'S PERFORMANCE IN WORK OR IN COMMUNITY ACTIVITY? DOES HE/SHE HAVE ANY UNUSUAL TALENT OR CAPACITY FOR LEADERSHIP? HOW DO OTHERS REGARD HIM/HER AS A PERSON?

* IF APPLICABLE, DESCRIBE THE APPLICANT'S RELIGIOUS COMMITMENT? WOULD YOU LIKE TO HAVE HIM/HER ON STAFF AT YOUR CHURCH?

* DOES THIS APPLICANT HAVE ANY SPECIAL STRENGTHS, WEAKNESSES, OR PROBLEMS OF WHICH WE SHOULD BE AWARE?

WE WELCOME ANY ADDITIONAL COMMENTS YOU THINK MIGHT BE HELPFUL TO US.

I recommend this candidate for Admission to Pittsburgh Theological Seminary:

* FOR ACADEMIC PROMISE

Please Select

* FOR PERSONAL PROMISE

Please Select

In keeping with the Buckley Act, this reference form will be destroyed at the completion of the Admissions process. No record of its contents will be contained in the student's personal file. This is to protect the confidential nature of the information we are seeking.

SUBMIT

** required*

Pittsburgh Theological Seminary
616 North Highland Avenue
Pittsburgh, PA 15206
Phone: 412-362-5610



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