

INSTRUCTIONS TO THE APPLICANT

Please complete the following before distributing the form.

NAME OF APPLICANT _____
Surname (family name) First Middle

SOCIAL SECURITY NUMBER (U.S. only) _____ **BIRTHDATE** Month/Day/Year _____

APPLICATION FOR QUARTER _____ **PROGRAM/CONCENTRATION** _____

NOTE: The following references are NOT acceptable:

- References from neighbors, friends, relatives, personal therapists, or employees who report directly to the applicant
- References from those who have known the applicant less than 1 year

TO THE APPLICANT: I understand this evaluation is to be received and maintained in confidence by Fuller Theological Seminary for admission and consideration for graduate status. I hereby expressly waive any and all rights I have of access to this evaluation under the Family Education Rights and Privacy Act of 1974, the California Information Practices Act of 1977, and any or all other laws, regulations, or policies. I understand that the rights I am waiving include, but are not limited to, the right to inspect and review this form; the right to have a copy of this form made for my use; the right to request an amendment of this form.

I agree to waive access to this reference evaluation.

I do not agree to waive access to this reference evaluation.

Signature of applicant _____ Date _____

INSTRUCTIONS TO THE RECOMMENDER

The applicant named above has applied for admission to Fuller Theological Seminary and has requested that you provide an evaluation. We would be grateful if you would give your frank evaluation of the applicant by responding to the questions listed below.

Fuller Theological Seminary is a professional graduate school which strives to equip men and women for various forms of Christian ministry. Each applicant is evaluated from several perspectives before a final admission is granted. Among the criteria which are evaluated are Christian experience, personal character, previous record, academic potential, and ministerial promise.

Please note above whether the applicant has agreed to, or has not agreed to, waive access to your reference evaluation.

To avoid delays in processing the application, please promptly mail or fax this completed form to:

Office of Admissions, Fuller Theological Seminary, 135 N. Oakland Ave., Pasadena, CA 91182 USA
Fax: (626) 584-5449

If mailing this form, please be sure to sign and seal the flap of the envelope.

TO BE COMPLETED BY THE RECOMMENDER

1. RELATIONSHIP TO THE APPLICANT

a. How long have you known the applicant? ____ Years ____ Months

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

c. Check the context(s) in which you know the applicant:

- As a member/attender of my church where I am in leadership
- As a colleague in ministry leadership
- As a student in one or more than one class
- As a student engaged in research or independent study under my direction
- As an employee under my supervision
- Other (please specify) _____

2. ASSESSMENT OF APPLICANT'S ABILITIES

a. How would you rate this individual compared to others at the same education level who have applied to graduate school?

- Below top 50% Top 50% Top 40% Top 30% Top 20% Top 10% Can't assess

b. Is the applicant's scholastic record, as you know it, an accurate reflection of the quality and range of his/her skills/competencies?

- Yes No If you choose "No," please attach an explanatory statement.

3. PLEASE CHECK THE FOLLOWING DESCRIPTIONS THAT APPLY TO THE CANDIDATE.

	Below Average ←		Average	Above Average →		Unknown
Social Appropriateness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional Stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal Demeanor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Poise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creative Instinct	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Articulateness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic Ranking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Critical Faculty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership Qualities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooperation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teamwork	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spiritual Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Church Involvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parachurch Involvement (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. PERSONAL EVALUATION OF THE APPLICANT (Attach additional pages if necessary.)

a. If this candidate is admitted to Fuller, his/her chief need for personal development or improvement will be:

b. The special assets this applicant has for graduate study and the ministry are:

c. Additional comments (optional):

RECOMMENDATION (Must be completed by the recommender)

Please check one of the following:

Recommend with enthusiasm for admission Recommend for admission Recommend with reservation Do not recommend for admission

Name of recommender (please print or type) _____

Position/title _____

Name of institution (church, school, organization, etc.) _____

Address _____ City _____ State _____ Zip _____ Country _____

Phone: Office () _____ Home () _____ E-mail _____

Signature _____ Date _____

Please check if you are a Fuller faculty member Fuller alumnus (Degree and year of graduation: _____)

Thank you again for your contribution. Please see reverse side for mailing/faxing instructions.