

Graduate School of Theology – *Personal Reference Form*

Applicant Information

Last Name _____ First Name _____

Phone (____) _____ Email _____

Pastor's Information

Name _____

Relationship to Applicant _____ Years Known _____

Address _____

City _____ State _____ Zip _____

Phone (____) _____ Email _____

Use the following scale to rate the applicant in the following areas:

0 – Not observed **1** – Weak **2** – Fair **3** – Good **4** – Very Good **5** – Outstanding

| | | | |
|---|--|-------------------------------|--|
| <i>Spiritual Maturity</i> | | <i>Devotion to Christ</i> | |
| <i>Integrity and Honesty</i> | | <i>Openness to Correction</i> | |
| <i>Self-Discipline</i> | | <i>Self-Motivation</i> | |
| <i>Family Life</i> | | <i>Willingness to Serve</i> | |
| <i>Ability to Work Well with Others</i> | | <i>Respectful of Others</i> | |
| <i>Communication Skills</i> | | <i>Leadership Skills</i> | |
| <i>Reliability</i> | | <i>Physical Health</i> | |
| <i>Emotional Stability</i> | | <i>Effect on Peers</i> | |
| <i>Cooperative</i> | | <i>Promotes Unity</i> | |

Please return this completed form by _____ to the following address.

Please mail this form to:

ABU – Graduate School of Theology
 Ref: Applicant's Name
 Attn: Dr. Brady Blevins
 3001 W Division
 Arlington TX, 76012