



REFERENCE FORM

Admission to the Doctor of Ministry Degree Program

Items marked with a red star * are required and must be completed.

NAME OF APPLICANT FOR WHOM YOU ARE PROVIDING A REFERENCE

The person named above is applying for admission to the Doctor of Ministry Program at United Theological Seminary of the Twin Cities and has designated you as a reference. Your help in evaluating this person's potential for theological study is of great importance to our admissions process. Thank you for your sincere and candid appraisal of this person's character and ability.

REFERENCE (YOU) PERSONAL INFORMATION

Name *

Position/Title *

Address *

Address 2

City/State/Zip *

Is the address above work or home? *

Work Home Other

Email *

Preferred Phone *

Phone Type *

Cell Work Home Other

ROLE IN APPLICANT'S LIFE

- Type of reference you are supplying? *
- Ministerial/Spiritual (work peer or supervisor)
 - Professional who knows applicant's work
 - Person in applicant's congregation/agency

How long, and in what capacities, have you known the applicant? *

SKILL EVALUATION

Please evaluate the applicant in the following areas. *

	Excellent	Above Average	Average	Below Average	No Basis for Judgment
Religious Commitment	<input type="radio"/>				
Depth of theological reflection	<input type="radio"/>				
Skills in the practice of religious work	<input type="radio"/>				
Capacity for critical analysis	<input type="radio"/>				
Ability at written communication	<input type="radio"/>				
Ability at oral communication	<input type="radio"/>				
Emotional maturity	<input type="radio"/>				
Ability to work with others	<input type="radio"/>				
Financial responsibility	<input type="radio"/>				

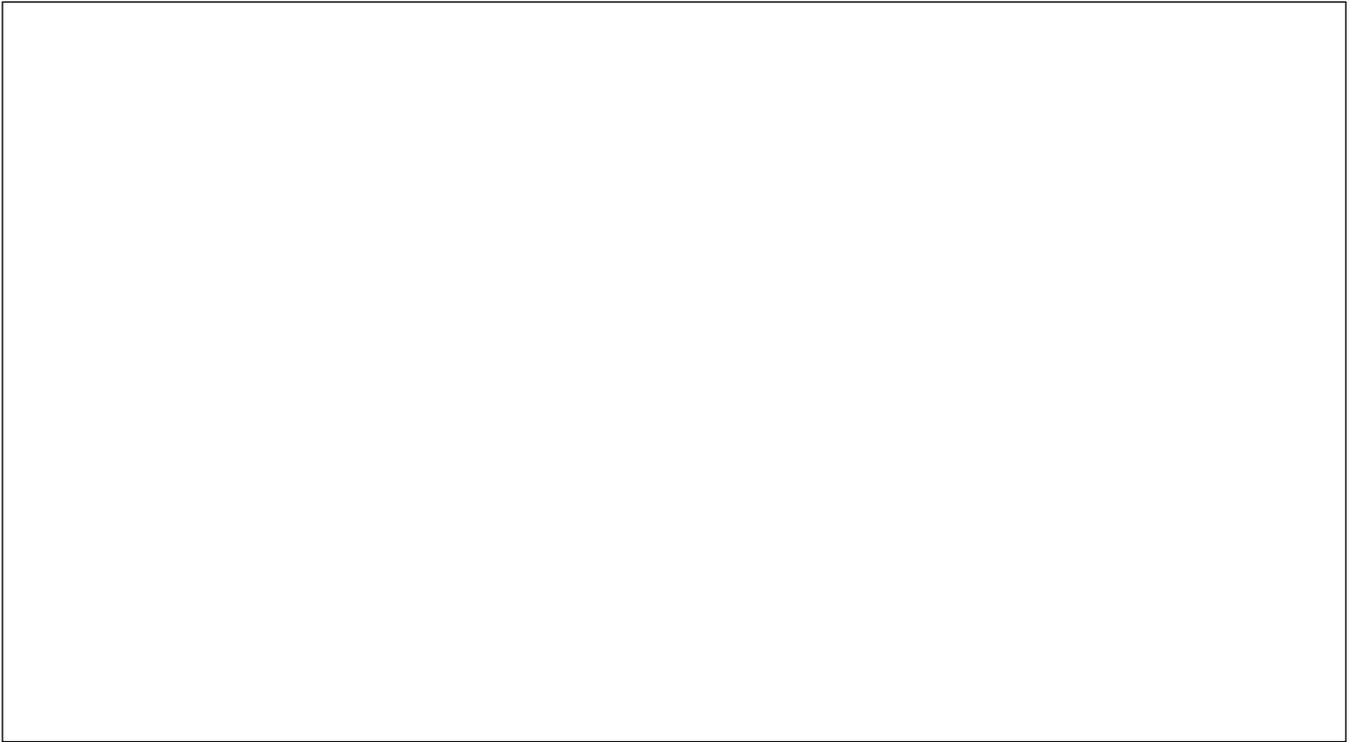
PLEASE COMMENT BRIEFLY ON THE FOLLOWING:

If you wish, you may submit a non-handwritten document giving the information below, instead of filling in the blanks provided

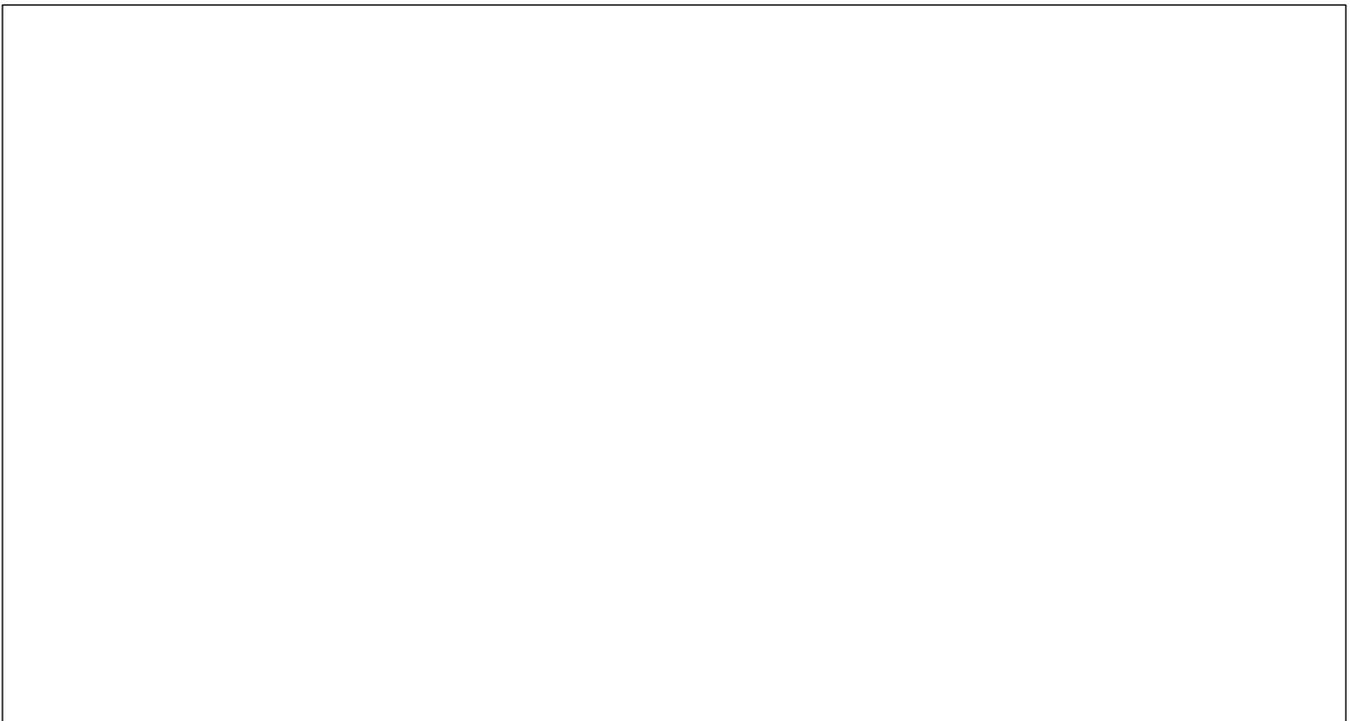
1. Describe the applicant's character, including openness to learning and growth. *

2. Summarize the applicant's strengths. *

3. Summarize the applicant's weaknesses. *



4. How would Doctor of Ministry studies benefit this person's future work? *



5. Other comments?

Thank you for your evaluation. Your comments will be carefully considered.

SIGNATURE

Reference Signature

Today's Date

Please submit completed and signed reference form to:

Admissions Office
United Theological Seminary of the Twin Cities
3000 Fifth Street NW
New Brighton, MN 55112-2598
651.633.4315 (fax)
admissions@unitedseminary.edu