



SEMINARY OF THE
SOUTHWEST

AN EPISCOPAL SEMINARY

ADMISSION REFERENCE

P.O. BOX 2247
AUSTIN, TEXAS 78768
PHONE: (512) 472-4133
FAX: (512) 472-3098
admissions@ssw.edu
www.ssw.edu

PART 1: TO BE COMPLETED BY THE APPLICANT

NAME _____

PROGRAM APPLIED FOR _____ STARTING DATE _____

I HAVE WAIVED MY RIGHT UNDER THE PROVISIONS OF THE FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT, AS AMENDED, TO EXAMINE REFERENCE FORMS AND LETTERS SUBMITTED ON MY BEHALF.

SIGNATURE

DATE

I HAVE NOT WAIVED MY RIGHT TO EXAMINE REFERENCE FORMS AND LETTERS.

SIGNATURE

DATE

NAME OF REFERENCE _____

ADDRESS OF REFERENCE _____

REFERENCE PHONES: WORK: _____ CELL: _____

REFERENCE EMAIL ADDRESS: _____

INSTRUCTIONS TO THE APPLICANT: Give this form, with a stamped, self-addressed envelope, to the person recommending you, and request that it be returned to you in a sealed envelope when it is completed.

PART 2: TO BE COMPLETED BY THE REFERENCE

The person named above has applied for admission to Seminary of the Southwest. We would be grateful to have your frank appraisal of this applicant, either by using the table and questions below as a guide or by attaching a letter if you prefer. If you would rather handle this by having a phone conversation with the Director of Recruiting & Admissions, please check here:

PLEASE PHONE ME – IN ADDITION TO MY COMMENTS ON THIS FORM, I WISH TO SPEAK WITH A SEMINARY REPRESENTATIVE.

MY NUMBER IS _____, AND DAYS EVENINGS ARE MORE CONVENIENT.

If you have questions about completing this form, please contact the Director of Recruiting & Admissions, Seminary of the Southwest.

HOW LONG HAVE YOU KNOWN THE APPLICANT? _____

IN WHAT RELATIONSHIP? _____

1. USING THE TABLE BELOW, PLEASE RATE THE APPLICANT IN COMPARISON WITH OTHERS YOU HAVE KNOWN OF SIMILAR BACKGROUND, INTEREST, AND ASPIRATIONS.

AREAS RATED	OUTSTANDING	GOOD	NEEDS IMPROVEMENT	POOR	NO BASIS
RELIGIOUS COMMITMENT					
INTELLECTUAL ABILITY					
ABILITY IN ORAL EXPRESSION					
ABILITY IN WRITTEN EXPRESSION					
INTERPERSONAL RELATIONSHIPS					
SENSITIVITY TO OTHERS					
LEADERSHIP POTENTIAL					
TEAMWORK SKILLS					
WORK HABITS					
PERSEVERANCE					
ENTHUSIASM					
IMAGINATION AND CREATIVITY					
EMOTIONAL MATURITY					
SOUNDNESS OF JUDGMENT					

PART 2: TO BE COMPLETED BY THE REFERENCE (Continued)

2. SINCE YOU HAVE BEEN LISTED AS A REFERENCE FOR THIS APPLICANT, WE EXPECT THAT YOUR OVERALL VIEW WILL BE POSITIVE. YOU MAY AMPLIFY THAT VIEW IF YOU WISH, BUT PLEASE ALSO COMMENT ON ANY SPECIAL LEARNING NEEDS OR PERSONAL CHARACTERISTICS, PERHAPS SUCH AS THOSE LISTED IN THE CHART, THAT COULD BE STRENGTHENED TO ENHANCE THE APPLICANT'S ABILITY TO ENGAGE IN SEMINARY EDUCATION AND FORMATION FOR MINISTRY.

3. DOES THE APPLICANT HAVE ANY HEALTH PROBLEM OR DISABILITY WHICH LIMITS ACTIVITY?

4. HAS THE APPLICANT GIVEN ANY EVIDENCE OF LEARNING DIFFICULTIES?

PART 2: TO BE COMPLETED BY THE REFERENCE (Continued)

5. HOW WOULD YOU ASSESS THE APPLICANT'S POTENTIAL FOR LEADERSHIP IN MINISTRY?

6. HOW WOULD YOU ASSESS THE APPLICANT'S SPIRITUAL AND ACADEMIC READINESS FOR SEMINARY?

7. DO YOU ADVISE US TO RECEIVE THE APPLICANT AS A STUDENT?

SIGNATURE _____ DATE _____

PRINTED NAME _____ POSITION _____

INSTRUCTIONS TO REFERENCE: When you have completed the reference form, please seal it in the envelope furnished to you by the applicant, sign your name across the envelope flap, and mail or return it to the applicant. The applicant is responsible for sending it to Seminary of the Southwest along with other application materials.

If you have questions about completing this form, please contact the Director of Recruiting & Admissions, Seminary of the Southwest.