

421 North 7<sup>th</sup> Street, Suite 700, Philadelphia, PA 19123

Office of Admissions Updated 10-12-21

## **ECCLESIASTICAL/PASTORAL RECOMMENDATION FORM**

TO THE APPLICANT
Please give this form to a pastor, elder, or deacon at your church who will provide an objective assessment of your character and abilities. First, enter your full name below and indicate the year and program for which you are applying. Sign the "Optional Waiver of Rights" if you wish to make this recommendation confidential by waiving your right to access it. Forward this form to the recommender, to be returned to the address above, your admissions counselor, or <a href="mailto:admission@missio.edu">admission@missio.edu</a>
Name (Last, First, Middle): Sex: ☐ Male ☐ Female Intended start term: ☐ Fall 20 ☐ Spring 20
Academic program for which you are applying:
Master of Divinity <i>Track Courses:</i>
☐ Biblical Language ☐ Urban Ministry ☐ Pastoral Ministry ☐ Missiology ☐ Counseling Concentration  Master of Arts: ☐ MA in Counseling ☐ MA in Ministry ☐ MA Biblical Studies ☐ MA Missional Theology  Master of Theology ☐
Certificate: ☐ Certificate in Biblical Studies ☐ Certificate in Christian Counseling
<ul><li>□ Certificate in Missional Theology</li><li>□ Certificate in Advanced Professional Counseling</li><li>□ Diploma Program</li><li>□ PULPIT Program</li></ul>
OPTIONAL WAIVER OF RIGHTS (Under the Family Educational Rights & Privacy Act of 1974)
I hereby waive my right of access to this evaluation form, when completed, and understand that this confidential recommendation to be used only in consideration of my application to Missio Seminary.  Signature
TO THE RECOMMENDER
The above named person is applying to Missio Seminary and has requested that your recommendation be included as part of the information on which our Admissions Office will base its decision. Please provide your assistance by answering the questions below When completed, please mail this form directly to our Admissions Office at the address shown above.
1. How long have you known the applicant and in what capacity?
2. What characteristics do you consider to be the strengths of the applicant?
3. Please describe the area(s) that you feel the applicant has room for growth?

4. How thoroughly do you think the applicant has thought out plans for graduate theological study?

lease give us your appraisal of the appl ABILITIES AND TRAITS	icant in term Superior	ns of the o	ualities liste Average		Not Observed	
	_	_	_			
Leadership Skills Interpersonal Skills						
Геасhability						
Humility						
Maturity						
Integrity						
Creativity						
Perseverance						
Ability to work in a team environment						
Ability to handle conflict						
Ability to work independently						
English written communication skills						
English oral communication skills						
Marital relationship						
Problem-solving ability						
Physical health						
Mental and emotional stability						
Do you recommend this applicant for I ☐ Highly recommend ☐ Re		•	nmend with	reservatio	n □ Do not recomme	nd
ame of Recommender						
sition or Title						
hool, Church, or Company						
ldress						

5. Missio Seminary seeks applicants who demonstrate potential for Christian ministry and related professions. Please comment on the

Thank you for your assistance. Please return this form to our Admissions Office at the address shown at the top of this document.