

ASIAN SEMINARY OF CHRISTIAN MINISTRIES
102 Valero St. Salcedo Village, Makati City
☎ 819-06-97/98 Fax: 813-13-13 e-mail: ascm@ascm.net

RECOMMENDATION FORM

NAME OF EVALUATOR

ADDRESS

RE: _____
(NAME OF APPLICANT)

The individual named above, an applicant to the Certificate Program Bth/BCE Mdiv.
 MCL of this Seminary has chosen you as _____ to aid us in
(Academic/Employment Reference/Ministerial Evaluator)
evaluating his/her application for admission. The information you are requested to furnish is of vital importance to the applicant and to us, and such will be held in strict confidence.

In answering the questions below and rating the applicant, please take into account your role as indicated above. Kindly enclosed the accomplished form in the attached self-addressed envelope provided by the applicant, seal and mail to us. The applicant, for obvious purposes, is not allowed to hand-carry the accomplished evaluation.

Your cooperation in this endeavor will be highly appreciated.

Thank you and God bless.

The Registrar
ASCM

1. How long have you known the applicant? _____

2. How did you know the applicant? _____

3. Please comment on the applicant's:

MORAL CHARACTER: _____

POTENTIAL AS A LEADER: _____

4. What specifically are his/her weak points? _____

| | Outstanding | Excellent | Good | Average | Poor | Not Observed |
|------------------------------|--------------------|------------------|-------------|----------------|-------------|---------------------|
| Intellectual Ability | | | | | | |
| Clarity of Oral Expression | | | | | | |
| Initiative | | | | | | |
| Dependability | | | | | | |
| Teachableness | | | | | | |
| Leadership Ability | | | | | | |
| Emotional Stability | | | | | | |
| Diligence in Study or Habits | | | | | | |
| Moral Fitness / Integrity | | | | | | |
| Respect for Authority | | | | | | |

- I recommend the applicant very highly.
- I recommend the applicant.
- I recommend the applicant with some hesitation.
- I do not recommend the applicant.

SIGNATURE: _____

POSITION / TITLE _____

ADDRESS: _____

DATE ACCOMPLISHED: _____

NOTE: Please enclosed the accomplished form in the mailing envelope and seal. Affix your signature/initial on the closed "flap" of the envelope.