

FACULTY OF THEOLOGY

of the

UNIVERSITY OF ST. MICHAEL'S COLLEGE

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A founding member of the Toronto School of Theology

LIMMMAR OF RACOMMUNICATION

TO BE COMPLETED BY THE APPLICANT:						
Applicant's Name :						
Intended Program: M.A.C.L. M.Div.	D M.R.E.	□ M.T	. S. (⊐ Diploma/C	ertificate	
Name of person making recommendation of (where applicable) Provide name of institution representing						
is asked to be an assessor of the applicant in the area of: Academic Ministerial Personal Other						
WAIVER: The applicant hereby waive his/her right to examine at any future time this Letter of Recommendation, which s/he understands will become part of his/her Admission File at the Faculty of Theology, University of St. Michael's College:						
Signature of Applicant Date						
THE APPLICANT IS FREE TO SIGN OR NOT SIGN THIS WAIVER. If the above waiver is not signed, Faculty of Theology, University						
of St. Michael's College will only make the recommendation available to the applicant upon proper written request.						
 appraisal of the applicant's capacity for graduate theological and ministerial education. After completing the form you may either mail it directly to: Committee on Admissions and Academic Standing Faculty of Theology, University of St. Michael's College 81 St. Mary Street, Toronto, ON M5S 1J4 CANADA or return the letter in a sealed envelope, with your signature over the back flap, to the applicant so that they can submit it with their application. (NOTE: If the waiver has not been signed by the applicant, you should not consider this recommendation to be confidential.) 1. How long have you known the applicant? 						
2. What is your relationship to the applicant?						
 Please check the boxes to indicate your assessment of the applicant's: 	1 (BELOW)	2	3 (AVERAGE)	4	5 (ABOVE)	NOT OBSERVED
Moral Character	0	0	0	0	0	0
Emotional Maturity	0	0	0	0	0	0
Leadership Capacity	0	0	0	0	0	0
Work Habits	0	0	0	0	0	0
Study Habits	0	0	0	0	0	O
Intellectual Curiosity	0	0	0	0	0	O
Self-Reflection	0	0	0	0	0	0
Openness to Other Points of View	0	0	0	0	0	O
Ability to Listen	0	0	0	0	0	O
Qualification to Complete a Graduate Degree	0	0	0	0	0	O

4. What is your overall assessment of the applicant's ability to work collaboratively with others? 5. What is your overall assessment of the applicant's ability to make meaningful connections between theological ideas and concrete life situations? Is there something else you would like to share about this applicant? (please feel free to append separate sheet to this form if necessary) Т □ highly recommend □ recommend **recommend with reservation d** do not recommend the above applicant for graduate theological studies at Faculty of Theology, University of St. Michael's College. (please feel free to append separate sheet to this form if necessary) (Signature of Person Recommending the Applicant) (Date) Contact Information of Person Recommending the Applicant: Street Address Email Address City Phone Number Province/State Postal/Zip Code Country