

Bachelor of Ministry Degree Program
Center for Advanced Ministry Training ❖ Harding University
Confidential Admission Reference (General)

To Be Filled Out By Prospective Student and Given To the Person Providing the Reference:

NAME (LAST, FIRST, MIDDLE)			
ADDRESS	CITY	STATE	ZIP CODE
I do <input type="checkbox"/> waive my right of access to the information in this reference letter. I do not <input type="checkbox"/>			

_____ (Signature) _____ (Date)

The person named above is an applicant to the Center for Advanced Ministry Training of Harding University. This form is to be completed and mailed directly to: BACHELOR OF MINISTRY/CAMT, Box 12236, Searcy, AR 72149-0001.

To Be Filled Out By Reference:

*Please check one on each line:	Yes	No	Unknown
1. Are you personally acquainted with the applicant: If yes, how long? _____ yrs.			
2. Do you feel this applicant has the ability to succeed academically in college?			
3. Are there any prevalent emotional, mental, or physical problems?			
4. If yes, has the applicant received professional counseling?			
5. Is the applicant of good moral character?			
6. Has the applicant been involved in law violations (excluding minor traffic offenses)?			
7. Does the applicant and/or family meet financial obligations in the community?			
8. Will the applicant be able to meet college expenses?			
9. Does this applicant seem to accept responsibilities at home?			
10. Has the applicant been able to function well in the job market?			

***Please Check One: Recommend Do Not Recommend Prefer Not to Make a Recommendation**

Please use the space below to clarify any of the above items which may need further explanation. Also add any other comments which will be of value concerning leadership abilities, personality, special talents, problems, etc. Use the back of the sheet if necessary.

NAME (LAST, FIRST, MIDDLE)			
ADDRESS	CITY	STATE	ZIP CODE
OCCUPATION:	TITLE:	OFFICE PHONE: ()	
HOME PHONE: ()	CELL PHONE: ()		

_____ (Signature) _____ (Date)

