

Applicant: This must come from a pastor or church official from your church. Family members may not serve as recommenders. If you are the pastor, please ask another church official to complete the recommendation. Please complete this section before giving this form to your recommender. This completed form should be sent to the **Director of Admissions, Campbell University Divinity School, P.O. Drawer 4050, Buies Creek, NC 27506.** Provide each recommender with a stamped, addressed envelope.

Applicant's Name							
	Last	First		Middle			
Permanent Addr	ess						
	P. O. Box or Street	City	State	Zip			
Phone Number		Email Address					
Applicant For:	□ Master of Divinity		of Divinity/Master of Business Administration of Divinity/Master of Arts in Clinical Mental Health Counselin				
	□ Master of Arts in Christian Min			0			
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Applicant's Sig	nature		Date				
helpful in planni call the Campbe	Aluating the applicant by providing the ng for the student as well as judging all University Divinity School Office	the applicant's qualifications of Admissions at 1-800-760-	for admission. If you 9827, ext. 1830.	a have questions, feel free to			
	(DI., Kev., etc.)						
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1 Toressionar true							
1. How long hav	ve you known the applicant?						
2. In what conte	xt have you known the applicant? _						
3. How well do	you know the applicant? 🛛 Casua	lly 🗖 Well 🗖 Very We	11				
	judgment of the applicant's promise or □ Average □ Good □ Ex						

5. Please describe the applicant's involvement in the local church.

6. Please comment on the applicant's potential for success in Christian ministry, giving attention to the leadership ability the applicant has expressed in the past and potential for the future.

7. What weaknesses do you discern in the applicant relative to a successful future in Christian ministry? Are there issues that would hinder the applicant in school or in ministry?

8. Upon completion of theological education, would this person be the type of candidate you would want to consider for a ministerial position in your church if a ministerial position were available?

 \Box Yes \Box No Please explain why you chose your answer.

9. Do you recommend this person for admission to the Divinity School? \Box Yes, with enthusiasm \Box Yes, but with reservations \Box No

If with reservations or no, please explain.

10. Recommenders are encouraged to include on a separate sheet of paper any further information that can be considered.

11. Place a check (\checkmark) in the space that, in your judgment, best describes the applicant.

Personal Qualities	Below Average	Average	Above Average	Superior	I have not observed	I have concerns
Christian commitment						
Commitment to the local church						
Spiritual maturity						
Gifts for ministry						
Leadership potential						
Ability to get along with others						
Use of English language and grammar						

Signature Date

Please mail to Director of Admissions, Campbell University Divinity School, P. O. Drawer 4050, Buies Creek, NC 27506.

Campbell University, Buies Creek, NC, is a Christian liberal arts institution, founded in 1887. The Campbell University Divinity School opened as the university's sixth school in August 1996, its purpose being to provide Christ-Centered, Bible-Based, and Ministry-Focused theological education for men and women preparing for ministry. The school offers the Master of Divinity, Master of Arts in Christian Ministry, and Doctor of Ministry degree programs. The school is accredited by The Association of Theological Schools. For information regarding Campbell University accreditations, please visit www.campbell.edu/accreditation. Dr. Andrew H. Wakefield is Dean. For more information, call 1-800-760-9827, ext. 1830 or see divinity.campbell.edu.