

# Point

## UNIVERSITY

# Spiritual Reference Form

### To be completed by the applicant

Print your name and address in the space below. Please give this form to your minister, youth minister, small group leader, or another adult in a position of spiritual leadership. Relatives are not permitted to complete reference forms.

Applicant's Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Mailing Address (Current): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I understand that this completed recommendation will be used only for admission purposes, and according to the Family Educational Rights and Privacy Act of 1974:

I agree to waive access to this statement.     I do not agree to waive access to this statement.

### To be completed by the minister/spiritual leader

Each applicant for admission to Point University must submit a spiritual reference form. We value your comments, and request that you give a full and candid report so that fair consideration may be given to the applicant.

How long have you known the applicant? \_\_\_\_\_

In what capacity do you feel you are considered a spiritual mentor by the applicant? \_\_\_\_\_

To your knowledge, has the applicant made a personal commitment to Jesus Christ?    Yes    No    Don't Know

Please evaluate the applicant in the following areas:

	<i>Excellent</i>	<i>Good</i>	<i>Average</i>	<i>Below Average</i>	<i>Poor</i>	<i>Don't Know</i>
Christian commitment						
Church attendance						
Church involvement						
Cooperation						
Diligence						
Initiative						
Integrity and honesty						
Leadership						
Moral character						
Peer opinion of applicant						
Relationship with family						
Responsibility						
Service to others						
Social adaptability						
Social influence						
Social relationships						

Please comment on any of the above ratings, especially if “below average” or “poor.” \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are there any emotional, spiritual or academic characteristics that you feel would hinder the applicant in a collegiate environment? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

From your perspective, to what extent is this student open to spiritual formation? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What will this student contribute to the community environment at Point? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please share with us any information you may have about the applicant that would help in our evaluation. This information may cover recent experiences or incidents in the applicant’s life, or could be a general spiritual appraisal.  
\_\_\_\_\_  
\_\_\_\_\_

Your Name: \_\_\_\_\_ Title/Position: \_\_\_\_\_  
Church Name: \_\_\_\_\_  
Your Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Thank you for taking the time to complete this reference form. Your observations will greatly assist us in our evaluation of the applicant. Please return this form at your earliest convenience to Point University, Admission Office, 507 West 10<sup>th</sup> Street, West Point, GA 31833, *or fax to:* 706-645-9473.**