# Recommendation Form

*To supplement application for admission*

**PLEASE TYPE OR PRINT**

<table>
<thead>
<tr>
<th>Name of Applicant</th>
<th>Last/Family</th>
<th>First</th>
<th>Middle</th>
<th>Former Name (if any)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Address</td>
<td></td>
<td></td>
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<tr>
<td>Degree Program</td>
<td></td>
<td>(M.Div., M.A., D.Min., Special)</td>
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</tbody>
</table>

**Recommender’s Name**

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**To the Applicant:**

The Educational Rights and Privacy Act, as amended, allows a candidate for admission to waive her/his rights of access to confidential letters or statements written on his/her behalf if the recommendation is used solely for purposes of admission or financial aid and if the candidate, upon request, is notified of the names of all persons making such recommendations on her/his behalf. The school does not require that you make such a waiver as a condition for admission or financial aid. Under the legislation you are free to choose to maintain your right of access to this recommendation or waive that right.

- [ ] I hereby waive my right of access to this recommendation and authorize the person named above to provide a candid evaluation of all relevant information to Andover Newton Theological School.
  - Date ___________________ Signature __________________________________

- [ ] I do not waive my right of access to this recommendation and authorize the person named above to provide a candid evaluation of all relevant information to Andover Newton Theological School.
  - Date ___________________ Signature __________________________________

**To the Recommender:**

If the applicant has not signed this form on one of the lines above indicating his/her choice regarding access, please return the form to the applicant before completing the recommendation.

Please rate the applicant in comparison to others of similar age and position whom you have known:

<table>
<thead>
<tr>
<th>Ability in oral expression</th>
<th>Superior</th>
<th>Excellent</th>
<th>Above Average</th>
<th>Average</th>
<th>Below Average</th>
<th>No basis for judgment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ability in written expression</td>
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<td>Perseverance</td>
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<td>Emotional maturity</td>
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<td>Imagination and probable creativity</td>
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<td>Effectiveness in working with others</td>
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<td>Past performance as a leader</td>
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<td>Potential as a leader</td>
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<td>Participation/contribution to community</td>
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</tbody>
</table>

(over)
To the Person Making the Recommendation:

The applicant wishes your response to be considered as part of her/his application, which will not be regarded as complete until your recommendation is received. If you will be making an academic recommendation, we would appreciate knowing about specific intellectual abilities and accomplishments. If you are making a general recommendation, reference to the applicant’s maturity, social sensitivity, interpersonal skills, ability to work in a diverse environment and promise for vocation are helpful. We encourage frank statements regarding the applicant's limitations and the probable effect of these limitations on the applicant's ability to do graduate work and future ministry. Feel free to submit your statement on a separate page.

Please print or type:

Name
Position
Organization
Address
Phone/e-mail

Signature Date

☐ Please call me. I would like to make additional comments beyond those I have provided here.

Andover Newton does not discriminate on the basis of sex, sexual orientation, age, race, color, national or ethnic origin, or handicap in administration of its admissions or educational policies, scholarship and loan programs, other School-administered programs, or in employment.

Please mail this statement directly to:

Andover Newton Theological School
The Admissions Office
210 Herrick Road
Newton Centre, MA 02459-2243
USA
Fax (001) 617-831-1630