



McMaster Divinity College  
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# LETTER OF REFERENCE

Note: The student must fill in Name, Program, Session, and Waiver before giving this form to the referee. Send this form to the referee with an envelope. When the form is returned to you, enclose it in its unopened envelope with the rest of your application.

Applicant's Name: \_\_\_\_\_

Program: \_\_\_\_\_ Session Beginning: \_\_\_\_\_

Waiver of Right of Access (Check one):  I hereby waive my right of access to this letter of reference

I hereby do not waive my right of access to this letter of reference

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

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

Instructions for the referee: Please indicate below your assessment of the applicant's academic and ministry potential compared to people studying at a similar academic level. Enclose the form in an envelope, seal it, sign across the flap and return to the applicant. Please complete this form in its entirety.

Ministry Potential	Outstanding Top 10%	Above Average Next 20%	Average Next 20%	Below Average Lower 50%	Unable to Tell
Personal interaction					
Pastoral aptitude					
Teaching aptitude					
<b>General</b>					
Leadership ability					
Maturity and emotional stability					
Ability to work collaboratively					
<b>Work Habits</b>					
Industry					
Self-directed learning					
<b>Communication Skills</b>					
Oral skills					
Written skills					
<b>Intellectual Ability</b>					
Analytical thinking					
Creativity					
Ability to relate ideas					
Ability to do research					
Overall intellectual ability					

PLEASE CHECK THE APPROPRIATE STATEMENT:

- I recommend the applicant
- I recommend the applicant with reservation (Please specify) \_\_\_\_\_
- I do not recommend the applicant (Please specify) \_\_\_\_\_

Comments: Indicate any further information that may be of relevance to the admissions committee, including any comments on the above items. Attach a separate sheet of paper or use the back of this form if necessary.

I have known the applicant for \_\_\_\_\_ years in the capacity of \_\_\_\_\_

Referee's name (Please print): \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

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