

GARDNER COLLEGE

- A Centre for Christian Studies -

Camrose, Alberta

CONFIDENTIAL PERSONAL REFERENCE FORM FORM B

This form is to be completed by the applicant's Pastor, a teacher, personal friend, or employer who can give adequate character reference.

Name of applicant _____ Program applying for _____

Address _____

City _____ Prov. _____ Postal Code _____

Person you have selected to complete this form:

Name _____ Position _____

SECTION ABOVE TO BE COMPLETED BY APPLICANT

The student named above is applying for admission to Gardner College. Your appraisal is important in determining probable success in college. Please fill in this form as completely as possible and mail it directly to us. Attention Registrar.

Please rate the applicant in these qualities by placing a check in the appropriate place.

	Poor	Below Average	Average	Above Average	Excellent	Unknown
Energy and Initiative						
Independence						
Leadership skills						
Self-confidence						
Healthy self image						
Concern for others						
Reaction to criticism						
Reaction to setback						
Respect toward authority						
Appearance and grooming						
Social Skills						
Writing skills						
Oral communication						
Academic ability						
Motivation						

PLEASE USE ADDITIONAL PAPER IF NECESSARY TO COMPLETE THIS FORM

Are you aware of any physical or emotional situation concerning this applicant which the college should be aware?

If yes, please explain. _____

Please list what you know to be the applicant's strengths and weaknesses.

I recommend this applicant for admission to Gardner College. Yes No

If no, why not? _____

Do you know of any additional information which should be shared with the college in relationship to this applicant?

Your relationship to applicant _____ Length of time acquainted with applicant _____

Date _____ * May we contact you for further references regarding this applicant? Yes No

*Your Signature

* I affirm that the above information contained in this document is true and complete to the best of my knowledge.

Please mail **CONFIDENTIALLY** to:

The Registrar
Gardner College
4707 - 56 Street
Camrose, Alberta T4V 2C4

Address _____

City _____ Prov. _____ Postal Code _____ Phone () _____