

Letter of Recommendation

This Section to be completed by Applicant

	Last Name,	First Name	
pplicant's Address:			
	Street Address		City
	State	Zip code	Country
teacher, employe	er, and other Christian Lo		e and give to your pastor, school rovide a stamped envelope ace.
	ive my of access to see thi for admission.	s recommendation knowin	g that the waiver is NOT required
	Signature of the Applica	ant	 Date
This Section to be c	completed by Recomm		
This Section to be o)
□ Teacher	□ Employer	ender (Check One)	
□ Teacher	☐ Employer	ender (Check One) □ Other:(dation.
☐ Teacher☐ I do not o 1. How long ha	☐ Employer	ender (Check One) □ Other : (of access to this recommendant?	dation.
☐ Teacher☐ I do not o 1. How long ha	☐ Employer choose to waive my right of the second control of the	ender (Check One) □ Other : (of access to this recommendant?	dation.



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Please rate the applicant according to your personal assessment in the following areas by circling the							
appropriate responses.							
Motivation	Excellent	Good	Fair	Poor	Unknown		
Integrity	Excellent	Good	Fair	Poor	Unknown		
Leadership Ability	Excellent	Good	Fair	Poor	Unknown		
Responsibility	Excellent	Good	Fair	Poor	Unknown		
Reliability	Excellent	Good	Fair	Poor	Unknown		
Intelligence	Excellent	Good	Fair	Poor	Unknown		
Friendliness	Excellent	Good	Fair	Poor	Unknown		
Health	Excellent	Good	Fair	Poor	Unknown		
General Character	Excellent	Good	Fair	Poor	Unknown		

5.	Describe his/her personal relationships with others.
6.	What personality traits, positive and negative, are most noticeable in the applicant?
7.	Further comments you may want to make regarding the applicant.
8.	Please check one ☐ I recommend applicant's acceptance.
	☐ I do not recommend applicant's acceptance.
	☐ I recommend applicant's acceptance with this reservation.
Namo	e Occupation/ Position
Addr	ress
	e Email
Signa	nture Date

Thank you for your help. Please enclose this reference in the stamped envelope which the applicant has provided and send to the address on the front of the form.