**Recommendation for Admission**

This reference form is to be filled out by a non-relative of the student applying for admission into Arlington Baptist University. It is preferred that this form is completed by a pastor/counselor/coach or someone in a mentoring position to the applicant.

**Please note that a student may ask to view his/her records at any time. Indicate whether or not you want this reference to be viewed by the student.**  [ ]  Yes [ ] No

**Reference Contact Information**

|  |  |
| --- | --- |
| Name: | Click or tap here to enter text. |
| Address: | Click or tap here to enter text. |
| City, State ZIP: | Click or tap here to enter text. |
| Phone: | Click or tap here to enter text. |
| Email: | Click or tap here to enter text. |

**Applicant Information**

|  |  |
| --- | --- |
| Applicant’s Name: | Click or tap here to enter text. |
| What is your relationship to the student? | Click or tap here to enter text. |
| Where is your place of mentoring? | Click or tap here to enter text. |
| Location name: | Click or tap here to enter text. |
| How long have you known the applicant? | Click or tap here to enter text. |
| Would you recommend this applicant for admission? | Click or tap here to enter text. |

Arlington Baptist University’s mission is to create worldchangers, and as such is interested in these personal

characteristics of their students. Please rate the applicant in the following areas:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Category** | **Below Average** | **Average** | **Above Average** | **Exceptional** |
| Academic Ability | [ ]  | [ ]  | [ ]  | [ ]  |
| Strength of Character |[ ] [ ] [ ] [ ]
| Self-Motivation |[ ] [ ] [ ] [ ]
| Emotional Maturity |[ ] [ ] [ ] [ ]
| Leadership |[ ] [ ] [ ] [ ]
| Respect for Authority |[ ] [ ] [ ] [ ]
| Dependability |[ ] [ ] [ ] [ ]

Arlington Baptist University is founded on biblical principles, and as such is interested in the spiritual maturity of their students. Please rate this applicant in the following areas:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Category** | **Below Average** | **Average** | **Above Average** | **Exceptional** |
| Spiritual Maturity |[ ] [ ] [ ] [ ]
| Service to Others |[ ] [ ] [ ] [ ]
| Church Involvement |[ ] [ ] [ ] [ ]
| Ability to Discuss SpiritualMatters |[ ] [ ] [ ] [ ]
| Desire for Biblical Truth |[ ] [ ] [ ] [ ]

**Please provide two-three strengths and weaknesses about this applicant.**

|  |
| --- |
| Strengths:Click or tap here to enter text. |
| Weaknesses:Click or tap here to enter text. |

|  |  |  |  |
| --- | --- | --- | --- |
| Reference Signature: | Click or tap here to enter text. | Date: | Click or tap to enter a date. |

**Please complete and return this document to the Admissions Office via email at admissions@abu.edu, fax (817) 274-1138, or mail to 3001 W. Division St., Arlington, TX 76012.**