



Application for Admission

311 Eleventh Street | Ambridge, PA 15003 | toll free: 1-800-874-8754 | fax: 724-266-4617

LETTER OF REFERENCE - Clergy Person

Name of Applicant _____

AUTHORIZATION FOR WAIVER which is to be read and signed by the applicant.

I understand my right under the U.S. Family Education Rights and Privacy Act of 1974 to review confidential appraisals placed in my file after January 1, 1975, that are submitted with reference to admission to a graduate or other school.

I do do not waive my right to review this reference.

Applicant's Signature

Date

Applicant's Address

()
Applicant's Phone Number

TO THE APPLICANT: Complete the above information before giving this form along with a self-addressed envelope to the individual who will be providing your reference.

TO THE EVALUATOR: The person named above is applying for admission to Trinity School for Ministry. In order to decide whether to accept the applicant, we need information about his/her commitment to the Christian ministry, character, emotional stability, academic ability, and present competence in ministerial practice. We are therefore requesting you to share with us your knowledge relative to these points and anything else that you think would be helpful to our admissions committee in assessing the applicant's qualifications for enrollment at Trinity. Please attach a one-two page letter with your comments on the applicant. Thank you for your time and effort.

Evaluator's Name (Printed)

Title

Church/Organization

Evaluator's Signature

Date

Address

()
Phone Number



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LETTER OF REFERENCE - Business Person or Academic Professor

Name of Applicant _____

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Evaluator's Name (Printed)

Title

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Evaluator's Signature

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LETTER OF REFERENCE - Layperson

Name of Applicant _____

AUTHORIZATION FOR WAIVER which is to be read and signed by the applicant.

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Title

Church/Organization

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