



TRINITY COLLEGE OF FLORIDA Personal Reference

SECTION ONE To Be Completed by the Applicant.

Complete Section 1 and give this form to a person who is familiar with you, preferably an employer, college teacher or guidance counselor. Section 2 should be completed by an individual not related to the applicant.

Name of applicant

Address of applicant

City State Zip

I, the undersigned, voluntarily waive any right to inspect the contents of this recommendation.

Signature Date

SECTION TWO To be completed by Reference.

The person named above is applying for admission to Trinity College. Please provide responses to the questions below. Upon completion, please fold and seal the form and mail it directly to the Office of Admissions at Trinity College. Thank you for participating in the admission process on this applicant's behalf.

- 1. What is your relationship to the applicant?
2. What do you believe is the applicant's greatest strength?
3. What do you believe is the applicant's greatest weakness?
4. To the best of your knowledge, is there clear evidence of the applicant's salvation through Jesus Christ?

Yes No Uncertain

- 5. Are you aware of any use by the applicant of tobacco, alcoholic beverages, or illicit drugs, or does the applicant have any inappropriate sexual relationships? Yes No If yes, please explain

- 6. Evaluate the applicant by circling the appropriate rating for the criteria given.

1-No Evaluation 2-Below Average 3-Average 4-Above Average 5-Excellent

Table with 10 columns: Consistent Christian Life, Church Involvement, Responsibility, Interpersonal Skills, Integrity, Response to Counsel, Character, Leadership, Reputation, Stability, Dependability, Motivation. Each cell contains a 1-5 rating scale.

- 7. Overall Recommendation: Highly recommend Recommend Recommend with reservation Do not recommend

8. Additional comments:

Name of reference

Address of reference

City State Zip

Signature of reference Date

PLEASE FOLD FIRST

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL

FIRST-CLASS MAIL PERMIT NO. 524 NEW PORT RICHEY, FL

POSTAGE WILL BE PAID BY ADDRESSEE

TRINITY COLLEGE OF FLORIDA
OFFICE OF ADMISSIONS – TRINITYQUEST
2430 WELBILT BOULEVARD
TRINITY FL 34655-9866

PLEASE FOLD LAST THEN TAPE