

Interdenominational Theological Center
An Ecumenical Professional Graduate School of Theology

Gammon Theological Seminary Baptist School of Theology Turner Theological Seminary Phillips School of Theology
Charles H. Mason Theological Seminary Richardson Ecumenical Fellowship

Educational Recommendation

To be completed by the applicant

Name of Applicant _____

I am asking _____ to write a letter of reference for me.

I am applying for the _____ degree program.

In accordance with provisions for the Federal Education and Privacy Act of 1974, enrolled students have the right to see their letters of recommendation unless they explicitly waive that right.

I waive my right of access to this recommendation.

I do not waive my right of access to this recommendation.

Signature Date

Signature Date

How long and in what capacity have you known the applicant? _____

We seek evaluation in the following areas:

1. The applicant's commitment to Christ and the church, and sense of call and purpose
2. The applicant's leadership ability, maturity, relational ability, and sense of self
3. The applicant's intellectual enthusiasm, competence, and critical thinking
4. The applicant's openness to a variety of perspectives

Please comment on as many of the above areas as possible. Refer to specific gifts and limitations rather than giving routine praise. Please attach your letter on your own stationery.

Signed _____ Date _____

Name _____ Position _____
Please type or print

If you would like to make additional comments beyond those you have provided, please feel free to call the Director of Admission and Recruitment at 404.527.7794.

It is the policy of the Interdenominational Theological Center not to discriminate on the basis of race, color, national or ethnic origin, sex, or disability in its admission policies, educational programs, and activities.

Please return to the Office of Admission and Recruitment
Interdenominational Theological Center, 700 Martin Luther King Jr. Drive, SW, Atlanta, GA 30314-4143

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Ministerial Recommendation

(Note: The denominational endorsement and ministerial recommendation must come from two different persons.)

To be completed by the applicant

Name of Applicant _____

I am asking _____ to write a letter of reference for me.

I am applying for the _____ degree program.

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I waive my right of access to this recommendation.

I do not waive my right of access to this recommendation.

Signature Date

Signature Date

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Name _____ Position _____
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Professional Recommendation

To be completed by the applicant

Name of Applicant _____

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I am applying for the _____ degree program.

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I waive my right of access to this recommendation.

I do not waive my right of access to this recommendation.

Signature Date

Signature Date

How long and in what capacity have you known the applicant? _____

We seek evaluation in the following areas:

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2. The applicant's leadership ability, maturity, relational ability, and sense of self
3. The applicant's intellectual enthusiasm, competence, and critical thinking
4. The applicant's openness to a variety of perspectives

Please comment on as many of the above areas as possible. Refer to specific gifts and limitations rather than giving routine praise. Please attach your letter on your own stationery.

Signed _____ Date _____

Name _____ Position _____
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Denominational Endorsement

This certifies that _____
Name of Applicant

of _____
Church Name

an applicant for admission to the Interdenominational Theological Center, is an acceptable
candidate for service in _____
Denomination

His/Her enrollment in the Interdenominational Theological Center is hereby approved.

Remarks: _____

Print Name

Signature

Official Position in the Denomination

AME.....Bishop
Baptist.....Moderator, President, Pastor
CME.....Bishop
COGIC.....Bishop
Presbyterian.....Bishop
UMC.....District Superintendent
UCC.....Conference Minister

Address _____

City State Zip Code

Date _____

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