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Name of Applicant:					
Program:	Area of Emphasis/Examination:				
The applicant has recognized the co					
To the Referee: The Office of Adr letter that addresses the same items across the flap to the applicant or to  1. How long have you known the a	Please return a re the Office Admis	eference as soon a sions at the addre	as possible in a s	ealed envelope wi	th your signatur
<ol> <li>Please indicate below your asse level.</li> </ol>	ssment of the app	olicant's potential o	compared to oth	ners studying at a s	imilar academic
Comoral	Outstanding	Above Average	Average	Below Average	Unable to Tell
General Leadership Ability	Top 10%	Next 20%	Next 20%	Lower 50%	
Maturity and Emotional Stability					
Ability to Work Collaboratively					
Originality					
Communication Skills	1	T			T
Oral Skills					
Written Skills					
Work Habits					
Industry					
Initiative					
Ministry Potential					
Personal Interaction					
Pastoral Aptitude					
Teaching Aptitude					
<ol> <li>Your personal feedback concern organization's letterhead.</li> </ol>	ning the applicant	would be appreci	ated. Please atta	ach this informatio	n on your
Please check the appropriate O I recommend the applicant. O I recommend the applicant with O I do not recommend the applic	n reservation. (Plea	•	•		
Name of Referee (please print):					
Phone:					
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Signature: \_\_\_\_\_ Date: \_\_\_\_\_