Institute for Creation Research

SCHOOL OF BIBLICAL APOLOGETICS

Character Reference Form

The Institute for Creation Research School of Biblical Apologetics does not discriminate on the basis of race, color, sex, national/ethnic origin, or handicap in admission or access to its programs.

______________________________________________________________
(Full name of applicant)

I have applied for admission to the Institute for Creation Research School of Biblical Apologetics and have given your name as a reference. Please answer the following questions to the best of your knowledge and mail this form directly to Institute for Creation Research, Attn: School of Biblical Apologetics, 1806 Royal Lane, Dallas, Texas 75229.

Please consider that, due to respect for privacy law concerns related to the Family Educational Rights and Privacy Act of 1974, the applicant has the right of access to this document unless he or she has signed the waiver statement below. If the waiver statement is not signed and there is information that you prefer to communicate personally, you may call the admissions office at 214.615.8322.

I willingly waive my right of access to see this recommendation, knowing that this waiver is NOT required as a condition for admission.

______________________________
Signature of applicant

1. How long have you known the applicant? _______Years ________Months
   In what capacity? _______________________________________________________

2. How well do you know the applicant? (Please check one.)
   _____Just by name and sight.
   _____Casually. Have had a few personal contacts.
   _____Fairly well. Have had a number of personal contacts.
   _____Have had a very close relationship.

3. Have you had the opportunity to observe the applicant’s church, home, and business life?
   Please explain. __________________________________________________________

4. Please give what information you can regarding his/her family life. ______________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

5. Please give what information you can regarding the applicant’s church, social, and business life.
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

6. Does the applicant work well with and respond well to others? Please explain.
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

(Revised 7/22/2014)
7. Does the applicant appear to have a serious concern about communicating God’s truth accurately? Please explain. ____________________________

________________________________________________________________________

8. What do you consider are the applicant’s significant talents or special abilities? __________

________________________________________________________________________

9. What do you consider are the applicant’s weak points? ____________________________

________________________________________________________________________

10. What degree of success do you predict for the applicant? ____________________________

11. Have you observed weaknesses in the applicant’s moral life? If so, please explain.

________________________________________________________________________

12. Has the applicant’s entire record been such that you would place full confidence in his/her integrity? Comments ____________________________

________________________________________________________________________

13. Do you recommend the applicant for admission? (Please check one.)

_____ Recommended for admission without reservation

_____ Recommended for admission with reservation

_____ Not recommended

Further comments ____________________________

________________________________________________________________________

Print name ____________________________ Signature ____________________________ Date ____________________________

Vocation ____________________________ Active or retired ____________________________

Address ____________________________ Street ____________________________

City ____________________________ State ____________________________ Zip ____________________________

(Revised 7/22/2014)