

Minister's Recommendation

Southwestern College of Christian Ministries

P.O. Box 340 • Bethany, OK 73008 • (405) 789-7661 • Fax (405) 495-0078 • E-Mail admissions@sccm.edu

To The Applicant

Fill out this section completely. Request your pastor to complete the form and mail it to the college. The applicant should provide a stamped envelope to the pastor, addressed to the Office of Admissions at the address listed above.

Name of Applicant _____
Last First Middle

Address of Applicant _____
P.O.Box/Street City State Zip

Social Security Number _____ Phone _____

Church currently attending _____ Denomination _____

Undergraduate ABLE

The Family Education Rights and Privacy Act of 1974 permits students access to certain credentials in their files. The Act, however, permits an applicant to waive his/her right of access to the reference. By signing below, the applicant waives his/her right to see this recommendation. This waiver is not required for admission.

Signature _____ Date _____

To The Pastor

The above prospective student has requested a personal reference from you. Please be frank and accurate in your response. If there are matters you would prefer to discuss with the Dean of Academic Affairs, please call (405) 789-7661. Your assistance is greatly appreciated.

How long have you known this applicant? six months or less 1 to 2 years More than 2 years

In what capacity have you known the applicant? Pastor Acquaintance Other _____

Do you feel the applicant is a born-again Christian? Yes No Comments: _____

Does the applicant's speech and conduct consistently exhibit his/her Christian beliefs? Yes No

Comments: _____

Is the applicant actively involved in local church ministry? Yes No

Comments: _____

Does the applicant work harmoniously with others? Yes No

Comments: _____

Please indicate the degree of success you would predict for the applicant at SCCM: Outstanding High Average Poor

Signature _____ Date _____

Print Name _____ Position _____

Church _____ Phone _____

Denomination _____

Address _____
P.O.Box/Street City State Zip