



Recommendation for Adult Admissions

Your reference is an important part of the application process.

Return to:
Warner University
13895 Highway 27
Lake Wales, FL 33859

Name of Applicant: _____

- Field of Intended Study:
- Associate of Arts in General Studies Associates of Science in Church Ministries
- Bachelor of Arts in Educational Studies Bachelor of Science in Church Ministries
- Bachelor of Arts in Business Administration Bachelor of Science in Criminal Justice

Check one:

- I waive my right of access to confidential statements and recommendations which are contained in, or are a part of, my educational records in the possession of, or used by, the Admissions Office.
- I do not waive my right to review your recommendation.

Applicant's Signature _____ Date _____

Name of Reference: _____

Relationship to Applicant: _____

- Please indicate the extent of your contact during the time of your association with the applicant:
 Daily Frequently Infrequently
- Place an obvious mark in the section that represents your estimate of the degree to which this applicant demonstrates each of the following qualities:

	Excels	Above Average	Average	Below Average	Poor
Demonstrates willingness to learn and grow	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to learn, understand, assimilate knowledge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to express self in writing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to express self orally	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to organize responsibilities and tasks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reliability and promptness with assignments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Willingness to pursue tasks to completion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work with people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Degree of flexibility and ability to adapt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Handles stressful situations appropriately	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- Please include a statement recommending acceptance or rejection of this applicant and any other comments you feel are important about the applicant. Be specific.

Reference's Signature

Date

Phone Number