

School of Parish Leadership & Evangelization

1000 E. Maple Ave., Mundelein, IL 60060-1174 847-970-4924 aaguilar@usml.edu

RECOMMENDATION FORM FOR THE DOCTOR OF MINISTRY DEGREE

Please print or type—return to Ana Aguilar at the address above. **Deadline: March 1, 2024**

TO THE AP		nformation	below and give this form to	your recommender.	
Name:					
	Title	First	Middle	Last	
In accordar	nce with th	ne provision	s of the Family Educational	Rights and Privacy Ac	t of 1974, enrolled students have
the right to	see their	recommend	ations unless they explicitly	y waive that right.	
I v	vaive my r	right of acces	ss to this recommendation.		
I d	o not waiv	ve my right o	of access to this recommend	dation.	
Signature				Date	
ment of the	w and com	plete this forr capacities an			Ve appreciate your candid assess- nate study. Please return this form
Name:					
Position:				Institution:	
Address:					
Work phon	e:			E-mail:	
Relationshi	p to Appli	cant:			
Please che	-		end with reservation, I	_ do not recommend t	his applicant for admission.
Signature					

1.	How would you assess the applicant's general suitability for ministerial performance (including openness to formation; personal character, aims, and values; qualities such as initiative, motivation, organization, dependability, and social skills).
2.	How would you describe the applicant's academic strengths for post-graduate study? Any weaknesses in this area?
3.	Based on your knowledge of this applicant, are there any specific areas from which the applicant would benefit as part of this program i.e. organization, administration?
4.	What are the applicant's strengths and weaknesses in the area of human relations?
5.	If you recommended with reservation or chose to not recommend a candidate, please explain the reason for your choice.