

MASTER OF DIVINITY

Admissions and Records

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PERSONAL EVALUATION (RECOMMENDATION)

Applicant's name _____ Date _____

TO THE EVALUATOR: To evaluate the applicant's capacity for graduate study, it is necessary to gather established information. Kindly help us by filling out this form.

Please provide an evaluation to the applicant on a scale of 1 - 10 (with 10 indicating the highest) in relation to the following attributes:

- () Loyal to the church
- () Socially accepted by others
 () Concerned for other people
 () Assuming responsibility
- () Balanced in stressful situations
- () Attractive in appearance
- () Confident in poise
- () Endowed for leadership
- () Willing to work in a team
- () Rich in ministry potential

I. For an applicant who is an SDA organizational worker:

The above evaluation was made by (Officer's name and Position)

	of the
(Organization)	owned by the
	(Conference/Union/Division) on/
We hereby authorize this applicant to stu	udy the MDiv Online/On-campus program.
(Signature)	Date:

II. For an applicant who is not employed by an SDA organization:

This applicant has been a church member for	years. The above evaluation was made
on (date)/ by the Board of the	church,
chaired by (Name and Position)	This church is a constituent
of the	Conference /Union/Division.

On behalf of the Church Board: (Name & Signature)

PLEASE SUBMIT THIS FORM DIRECTLY TO AIIAS ADMISSIONS & RECORDS OFFICE Email Address: admissions@aiias.edu