



Adventist International Institute
of Advanced Studies
Graduate School and Seminary

MASTER OF DIVINITY

Admissions and Records Office

Lalaan 1, Silang Cavite 4118, Philippines | Email: admissions@aiaas.edu | Phone (046) 4144-318 | Website: www.aiaas.edu

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 | ☐ Confident in poise |
| ☐ Socially accepted by others | ☐ Endowed for leadership |
| ☐ Concerned for other people | ☐ Assuming responsibility |
| ☐ Balanced in stressful situations | ☐ Willing to work in a team |
| ☐ Attractive in appearance | ☐ 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 study 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@aiaas.edu