To the reference: The above named applicant is applying for admission to Richmont and is asking you to furnish a reference. Richmont provides master’s-level training in professional counseling and marriage and family therapy from a Christian perspective. The Admissions Committee would appreciate your frank evaluation of the applicant’s academic/professional performance.

How long have you known the applicant? ________ Years ________ Months

How well do you know the applicant? ☐ Very well ☐ Well ☐ Not very well

I have known the applicant ☐ As an undergraduate ☐ As an undergraduate assistant ☐ As an advisee
☐ As a graduate student ☐ Other (please specify) ______________________________

The applicant has taken ☐ None of my classes ☐ One of my classes ☐ Two or more of my classes

Compared with ________________________________ (please indicate reference group: college seniors, first-year graduate students or other), I consider applicant’s intellectual ability to be in the
☐ Lowest 25% ☐ Upper 25% ☐ Upper 5% ☐ Middle 50% ☐ Upper 10%
☐ Upper 1% ☐ Inadequate opportunity to observe the applicant

Characteristics (please check)

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<tr>
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<th>Very Low 1-25%</th>
<th>Modest 25-50%</th>
<th>Good 50-75%</th>
<th>Very Good 75-90%</th>
<th>Outstanding 90-95%</th>
<th>Truly Exceptional 95-100%</th>
<th>Unable To Judge</th>
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<tbody>
<tr>
<td>Academic/professional ability</td>
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<td>Creative, innovative thinking</td>
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<td>Capacity for objective evaluation of self</td>
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<td>Empathic capacity</td>
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<td>Ability to work independently</td>
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<td>Capacity to handle stress</td>
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<td>Open-mindedness, tolerance for differences</td>
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<td>Energy level at work</td>
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<td>Commitment to counseling</td>
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In general, how would you rate the applicant’s potential for counseling work?

- Poor
- Fair
- Good
- Excellent
- Unable to determine

Indicate the strength of your overall endorsement of the applicant.

- Highly recommend
- Recommend with some reservations
- Recommend
- Do not recommend

* You may provide additional comments or information regarding the applicant on a separate sheet.

Name ____________________________________________________________
Address __________________________________________________________
Phone Number __________________________ Email Address _________________________
Signature __________________________ Date ___________

Thank you for your time in completing this reference. Please return this form to:

Richmont Admissions Office
McCarty Building
2055 Mount Paran Road, N.W.
Atlanta, GA 30327
404-233-3949