



5. Are you aware of any personality traits which hinder the applicant in relationships with others? [ ] Yes [ ] No If yes, please explain on the reverse side.

6. Please comment on any special circumstances, home conditions, etc., which might prove helpful in considering the applicant's admission to Luther Rice.

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7. Please circle your recommendation of the applicant for admission to Luther Rice College and Seminary:

Highly recommended

Recommended

\* Recommended with reservations

\* Not Recommended

\* Please indicate the reason(s) for this recommendation on a separate sheet.

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Church: \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_

Street or P.O. Box

\_\_\_\_\_

City

State

Zip

Web Address: \_\_\_\_\_

Phone number where you can be reached from 9 AM - 4 PM :

( \_\_\_\_\_ ) \_\_\_\_\_

Email Address: \_\_\_\_\_

**DO NOT GIVE THIS FORM BACK TO THE STUDENT. SEND IT DIRECTLY TO THE LUTHER RICE ADMISSIONS OFFICE.**