

ST. JOSEPH'S SEMINARY
201 Seminary Ave.
Yonkers, NY 10704

LETTER OF RECOMMENDATION

To be filled in by the applicant:

Applicant's Name _____

Name of Person to Make Recommendation _____

Waiver: I hereby waive my right to examine at any future time this Letter of Recommendation which I understand will become part of my Admission File at the Institute of Religious Studies.

Date: _____ Signed: _____
(Signature of Applicant)

THE APPLICANT IS FREE TO SIGN OR NOT TO SIGN THIS WAIVER. If the waiver is not signed, St. Joseph's must make the recommendation available to the applicant upon proper written request.

To be filled in by the person recommending the applicant:

The above-named person is applying for admission to St. Joseph's Seminary Masters Degree Program. Your honest response to these questions will be greatly appreciated. (NOTE: If the waiver has not been signed by the applicant, you should not consider this recommendation to be confidential.)

	1 Below	2	3 Average	4	5 Above
Moral character					
Work habits					
Study habits					
Ability to work independently					
Communication skills:					
a) oral					
b) written					
Critical-thinking skills					
Qualifications to complete a graduate program					

What is your overall assessment of the applicant as a candidate for a graduate degree?

Signature of Person Recommending the Applicant

Date

For students attending the Yonkers and Poughkeepsie locations, send completed recommendation to:

**Dr. Donna Eschenauer
Office of the Associate Dean
201 Seminary Ave.
Yonkers, NY 10704
donna.eschenauer@archny.org**

For students attending the Huntington and Douglaston locations, send completed recommendation to:

**Mr. Ryan Williams
Office of the Associate Dean
440 West Neck Road
Huntington, NY 11743
rwilliams@icseminary.edu**