

**ST. JOSEPH'S SEMINARY & COLLEGE**  
**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

Please submit your Reference Form to the Office of the Registrar

Office of the Registrar  
Saint Joseph's Seminary & College  
201 Seminary Avenue  
Yonkers, New York 10704