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GRADUATE REFERENCE FORM

THIS SECTION IS TO BE COMPLI	ETED BY THE APPL	ICANT				
Name	Date of birth					
Last four digits of SSN	Graduate pro	ogram				
Check one: I waive my right to access the letter I retain my right to access the letter	of recommendation un	der the Family Educati	on Rights and Pri	vacy Act of 1974.		
Signature of applicant				Date		
THIS SECTION IS TO BE COMPLI	ETED BY THE EVAL	UATOR				
The person named above has applied for and return in a sealed envelope to candic		te program at Fresno Pa	cific University. P	lease complete this refe	rence form	
Name	Title					
Signature	Date					
Organization	Phone					
Address		CITY		STATE	ZIP	
1. How long have you known the applic						
In what relationship?						
2. Please compare the applicant to oth	_	_	below.			
T 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Exceptional	Above Average	Average	Below Average	No basis for judgment	
Intellectual ability						
Communication skills						
Interest and enthusiasm						
Contribution potential in field						
Emotional maturity						
PLEASE ANSWER THE FOLLOWI	NG QUESTIONS ON	A SEPARATE SHEE	Γ OF PAPER			
 Describe the applicant's leadership Describe the applicant's strong poin Describe any area(s) that are challe Discuss the applicant's overall abilities in his/her chosen field. Compare applicant in his/her chosen field. 	nts. Include special abil nges for the applicant. ty to complete graduate	ities. e study, his/her general o		ss to change and potent	ial as a leader	
CHECK ONE						
☐ I recommend the applicant for grad	duate study at Erespo D	acific University				
	•	=				
• • •	I do not recommend the applicant for graduate study at Fresno Pacific University					
I recommend the applicant with th	us reservation					