Red River Baptist Association
Seminary Scholarship Reference Form

The person named below has applied to the RED RIVER BAPTIST ASSOCIATION for the Seminary Scholarship and has given your name as a reference. We would appreciate you filling out this reference form and giving us your frank appraisal of this person. This information will help us evaluate the applicant. Your appraisal will be held in complete confidence. Thank you for assisting us. **Please return the form within two weeks.**

NAME OF APPLICANT_____________________________________________

1. Give approximate dates during which you were closely associated with the applicant. ______ to _______.
   _____ I do not know this person well enough to respond.

2. Under what circumstances have you known the applicant? (Ex. pastor, teacher, employer, friend, etc.):

______________________________________________________________________________
______________________________________________________________________________

3. Does the applicant have any objectionable habits? ___Yes ___No
   Please comment:________________________________________________________________
   _____________________________________________________________________________

4. Rate the applicant's prospective performance in a vocational Christian ministry. (Check one)
   ___Below Average ___Above Average ___A Rare Find
   ___Average ___Excellent

5. The applicant's religious experience/commitment is: (Check one or more)
   ___Relatively superficial ___Profound
   ___Over-emotional ___Contagious
   ___Growing, Healthy ___Other (Explain)

______________________________________________________________________________
______________________________________________________________________________

6. Do you feel the applicant is a worthy representative of Christian ideals? _____Yes _____No

7. Please give additional facts or comments that may help evaluate the applicant.

___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

(over)
8. Please rate the applicant with respect to each of the listed qualifications. Compare this student with other persons you know who are active in church or a religious program. Please do not check if you have no opportunity to observe, or if you feel uncertain.

<table>
<thead>
<tr>
<th>QUALIFICATIONS</th>
<th>LOW BELOW</th>
<th>AVERAGE</th>
<th>AVERAGE ABOVE</th>
<th>AVERAGE HIGH</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEPENDABILITY</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>EMOTIONAL STABILITY</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>LEADERSHIP</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>INTELLIGENCE</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SOCIAL ACCEPTANCE</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PERSONAL APPEARANCE</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>RESPONSIVENESS TO</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>OTHERS</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

9. If you were making the decision, would you grant this person a scholarship?
   _____Yes _____No

Comment if you desire: ________________________________________________________

DATE_______________________
SIGNATURE__________________________________
ORGANIZATION____________________________________
POSITION____________________________________

Please return the completed form to the Red River Baptist Association, PO Box 396, Arkadelphia, AR 71923