

# PASTORAL REFERENCE FORM



Office of Admissions  
 Toccoa Falls College  
 PO Box 800899  
 Toccoa Falls, GA 30598  
 Phone: (888) 785-5624  
 Fax: (706) 282-6012  
 Email: admissions@tfc.edu  
 www.tfc.edu

To the Applicant: Please fill out the top part of the form and give to your reference (**this must be a non-relative**).

**Classification: (check one)**

- New
- Transfer
- Former
- International
- Online

**Enrollment Date:**

- Fall \_\_\_\_\_
- Winterim \_\_\_\_\_
- Spring \_\_\_\_\_
- Summer \_\_\_\_\_

**Attendance: (check one)**

- Full-time
- Part-time

**Housing:**

- On-campus
- Off-campus

**PLEASE TYPE OR PRINT**

Applicant's Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

The statements on this reference form will be kept confidential. We suggest that you sign the following statement to allow your evaluator greater freedom in his/her responses.

*"I understand that this confidential statement will be submitted to the Admissions Committee at Toccoa Falls College, and its contents will not be shared with me. This information will be used for admissions purposes only. I hereby waive my right to see this evaluation. I realize that this waiver is not a condition of admission."*

Applicant's Signature: \_\_\_\_\_

**TO THE EVALUATOR:** The above named applicant is applying for admission to Toccoa Falls College. Toccoa Falls College is a four-year Christian college preparing students for careers and ministries in a variety of settings. Please be thorough and specific since we value your responses. Thank you in advance for your assistance.

How long have you known the applicant? \_\_\_\_\_ What is your relationship to the applicant? \_\_\_\_\_  
 (i.e. mentor, Bible study leader, pastor, etc.)

Please rate the applicant in the following areas by circling the appropriate number. If you are unable to provide information on a specific area, please leave it blank.

	1 = poor	2 = below average	3 = average	4 = above average	5 = superior		1	2	3	4	5
Responsibility/Reliability	1	2	3	4	5	Integrity/Honesty	1	2	3	4	5
Personal Initiative	1	2	3	4	5	Common Sense/Judgment	1	2	3	4	5
Social Skills	1	2	3	4	5	Self-Image	1	2	3	4	5
Discretion with Opposite Sex	1	2	3	4	5	Church Participation	1	2	3	4	5
Respect for Authority	1	2	3	4	5	Seriousness of Purpose	1	2	3	4	5
Emotional Stability	1	2	3	4	5	Concern for Others	1	2	3	4	5

Considering the rigors of college study, what help will the applicant need in order to succeed?

Toccoa Falls College is a smoke-free, drug-free, alcohol-free campus. Is the applicant's lifestyle consistent with these standards?

Yes  No If not, please explain:

How do you recommend the applicant to Toccoa Falls College?

- I recommend enthusiastically.
- I recommend with the following reservation: \_\_\_\_\_
- I recommend strongly.
- I do not recommend.
- I recommend.

Name of reference: \_\_\_\_\_ Signature: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: Home (\_\_\_\_\_) \_\_\_\_\_ Work (\_\_\_\_\_) \_\_\_\_\_

WOULD YOU LIKE TO RECEIVE INFORMATION ABOUT TOCCOA FALLS COLLEGE FOR YOUR FILES?  YES  NO

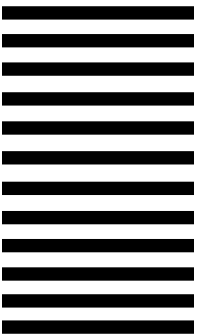
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Please fold on guide lines and tape. No postage is necessary if mailed in the United States.



TOCCOA FALLS COLLEGE  
OFFICE OF ADMISSIONS  
PO BOX 100 899  
TOCCOA GA 30577-9811

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