

NEW YORK THEOLOGICAL SEMINARY

...continuing The Biblical Seminary in New York

Reference Form for Clinical Pastoral Education

CPE Applicant

Name: _____

Address: _____

Phone: _____

Reference

Name: _____

Position: _____

Address: _____

Phone: _____

Program applied for:

_____ Fall Extended Unit

_____ Spring Extended Unit

_____ Summer Intensive Unit

This information will be kept strictly confidential.

Please do not return this reference to the candidate but send it directly to:

**The Rev. Dr. Nancy Fields
New York Theological Seminary
475 Riverside Drive, Suite 500
New York, NY 10115**

1. How long have you known the candidate, and in what capacity?

2. How do you evaluate the candidate:

a. In his/her potential for pastoral effectiveness?

b. In his/her personal commitment to learning?

c. In his/her maturity of faith and depth of spiritual development?

3. If you were hospitalized, how would you feel about him/her visiting you?

4. Please evaluate the candidate on the following scale:

	Excellent	Very Good	Good	Weak	Very Weak
Intellectual Ability					
General Knowledge					
Job Perseverance					
Emotional Maturity					
Creativity					
Pastoral Effectiveness					
Interpersonal Communication					

5. Please elaborate on any of the above.

6. What do you think of his/her plan to do Clinical Pastoral Education?
(Motivation, attitude, readiness for CPE, etc.)

7. Additional remarks, comments or concerns:

Signature: _____

Date: _____