

Recommendation

This portion is to be completed by the applicant

Applicant's Name: UWAMAHORO Juvénal
 Last/Family First Middle
 Address: Kimisagara Sector; Nyarugenge district Kigali City
 Phone: 0788464016 Email: uwamahorajuvénal@gmail.com
 Anticipated Program of Study: M. Div

This recommendation is from a (check one):

- ☒ Pastor ☐ Teacher/Professor (Academic)
☐ Synod or denominational official
☐ Missioner

Note:

- The recommendation should be made by someone who is not a member of your immediate family.
- Make two copies of this form and give each to the each recommender
- All the recommendation letters should be submitted after being sealed.

This portion is to be completed by the recommender

1. In view of your knowledge of the applicant, how do you assess his or her abilities and character in the following categories as compared to his or her peers?

	Observed	Weak	Fair	Average	Good	Outstanding
Intellectual ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Ability to work with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creativity and imagination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Interpersonal skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Oral communication skills in English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written communication skills in English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality to work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Ability to analyze problems & formulate solutions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation for proposed program study	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Potential for career advancement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aptitude for chosen ministry or profession	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. How long have you known the applicant? _____

How well? ☒ Very well ☐ rather well ☐ Casually ☐ Not well

3. If you are a professor, in how many of your courses have the applicant been enrolled?

☐ Undergraduate () ☐ Graduate ()

4. Please provide us with a statement concerning the applicant's spiritual maturity, abilities, personality, character, and professional promise. Also include in your statement an assessment of his or her strengths and weakness.

We appreciate the applicant's behavior in general

5. Do you see this person as someone whom you want to hire as your pastor or church staff member or like to work with as a colleague? ☒ Yes ☐ No ☐ Unsure

Please Comment: _____

6. We would appreciate your additional comments. Use a separate page if necessary.

7. I recommend this applicant for the admission to UWMF:

☒ Highly recommend ☐ Recommend ☐ Recommend with reservation ☐ Do not recommend

8. Name: Twahirwa Laurent Signature & Seal: _____ Date: 31/12/2018

Church / Organization / School: ADSPR Position / Title: Beverend

Address: Kimisagara Sector

Phone: 0788776094 Email: _____