



FAITH • SCHOLARSHIP • SERVANTHOOD

# TRANSFER REFERENCE

## TO BE COMPLETED BY THE APPLICANT:

PLEASE PRINT YOUR NAME ON THIS FORM AND THEN HAVE IT COMPLETED AND RETURNED TO US BY YOUR PASTOR, RELIGIOUS LEADER, COUNSELOR, EMPLOYER, ETC.

LAST NAME FIRST NAME MIDDLE NAME

( ) — —

TELEPHONE NUMBER SOCIAL SECURITY NUMBER

STREET ADDRESS

CITY STATE ZIP CODE

**WAIVER OF RIGHTS:** I HEREBY WAIVE MY RIGHT TO HAVE ACCESS TO THIS EVALUATION FORM, WHEN COMPLETED, AND UNDERSTAND THAT THIS CONFIDENTIAL REFERENCE IS TO BE USED ONLY IN CONSIDERATION OF MY APPLICATION TO WARNER SOUTHERN COLLEGE.

APPLICANT'S SIGNATURE DATE

## TO BE COMPLETED BY A PERSONAL ACQUITTANCE:

THE ABOVE STUDENT IS APPLYING FOR ADMISSION TO WARNER SOUTHERN COLLEGE. WE VALUE YOUR COMMENTS HIGHLY AND ASK THAT YOU GIVE A FULL AND CANDID REPORT SO THAT FAIR CONSIDERATION MAY BE GIVEN TO THE APPLICANT. WE THEREFORE ASK FOR CAREFUL APPRAISAL OF THE APPLICANT'S ABILITY, CONDUCT, PERSONALITY, AND CHARACTER. YOUR COOPERATION IN ANSWERING THESE QUESTIONS WILL BE GREATLY APPRECIATED.

HOW LONG HAVE YOU KNOWN THE APPLICANT? \_\_\_\_\_

IN WHAT CONTEXT HAVE YOU KNOWN THE APPLICANT? \_\_\_\_\_

PLEASE WRITE A SUMMARY OF THE APPLICANT ASSESSING THE ACADEMIC RECORD, PERSONAL QUALITIES, AND PROMISE AS A STUDENT AT WARNER SOUTHERN COLLEGE. WE ARE PARTICULARLY INTERESTED IN EVIDENCE ABOUT CHARACTER, RELATIVE MATURITY, INTEGRITY, INDEPENDENCE, AND VALUES. ALSO, ANY SPECIAL TALENT OR QUALITY IN THE APPLICANT SHOULD BE NOTED. PHOTOCOPIED REPORTS ARE ACCEPTABLE. (PLEASE USE THE BACK OF THIS FORM OR ATTACH ADDITIONAL SHEETS IF NECESSARY.)

## I RECOMMEND THIS APPLICANT FOR ADMISSION TO WARNER SOUTHERN COLLEGE:

	WITH ENTHUSIASM	STRONGLY	FAIRLY STRONGLY	WITHOUT ENTHUSIASM	NOT RECOMMENDED
FOR ACADEMIC PROMISE	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
FOR CHARACTER AND PERSONAL PROMISE	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
OVERALL RECOMMENDATION	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

NAME

ADDRESS

CITY STATE ZIP CODE

( ) —

SIGNATURE TELEPHONE NUMBER DATE

POSITION

PLEASE COMPLETE AND RETURN THIS FORM DIRECTLY TO:  
WARNER SOUTHERN COLLEGE, OFFICE OF ADMISSIONS, 13895 HWY 27, LAKE WALES, FL, 33859, 800-949-7248