

BETHEL BIBLE SEMINARY
DOCTOR OF PSYCHOLOGY in MARRIAGE & FAMILY THERAPY

Letter of Recommendation

Name of Applicant: _____

Name of Referee: _____

Position: _____

Name of Institution: _____

Address of Institution: _____

Contact No.: _____

Email Address: _____

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

2. Please list any unique/ special qualities or skills, or any other qualifications that you think make this individual a viable candidate for the DPsy program in MFT.

3. What do you consider the strengths of the applicant?

In what areas do you think the applicant can improve?

4. How would you rate the abilities of the applicant?

	Excellent	Good	Satisfactory	Average	Below Average	No Basis To Judge
Intellectual Ability						
General Knowledge						
Work or Study Habits						
Initiative						
Perseverance						
Judgment						

5. Please give general comments which may be of assistance in assessing the applicant.

6. In view of the strengths of the captioned applicant, I ****highly** recommend/ recommend/ do not recommend ****him/ her** to enroll your esteemed captioned Program.

****Please delete where inappropriate.**

Referee's Signature: _____ Date: _____

This confidential referral should be sent directly by the person to:

Admissions,
Bethel Bible Seminary,
45-47 Grampian Road, Kowloon, Hong Kong