



**IMMACULATE CONCEPTION CENTER
SCHOOL OF SPIRITUAL DIRECTION
THROUGH FRANCISCAN UNIVERSITY OF STEUBENVILLE**

Applicant Name _____

The above-named person has made an application for admission to the School of Spiritual Direction at the Immaculate Conception Center and requests that you complete this reference form.

In order for us to consider his/her application, it is necessary for you to submit this reference form. Your honest and candid evaluation will be very much appreciated. **Your comments will be held in strict confidence by the School of Spiritual Direction program and will not be shared with the applicant.**

Please complete this form and email it to admin@immaculateconceptioncenter.org. Thank you for your help and cooperation.

If you have any questions regarding this form, contact the Site Director, Dan Shaughnessy, at the following email and phone number:

admin@immaculateconceptioncenter.org

860-928-7955

(Please type or print legibly. The questionnaire begins on page 2).

How long have you known the applicant? How well and in what context do you know the applicant?

What is/was your relationship to him (e.g., relative, employer, fellow worker, neighbor, friend, etc.)?

Do you have any concerns about the applicant's ability to fulfill their responsibilities as a spiritual director without harming their marital and/or family life?

Is there anything about the applicant's history that concerns you regarding their ability to function as a representative of the Catholic Church?

What is your understanding of the applicant's prayer and sacramental life?

Do you know of any history of emotional disorders, substance abuse, abusive relationships, or criminal arrests/indictments/convictions that might impede or hinder the applicant's ability to serve as a representative of the Catholic Church?

What special talents, capabilities and/or strengths does the applicant possess which would be of value to the Church?

What limitations or weaknesses, if any, does the applicant have that might hinder their ability to perform in service to the Church?

How would you rate the applicant on the following characteristics? (Please select one answer for each category).

Honesty/Integrity	<input type="checkbox"/> Above average	<input type="checkbox"/> Average	<input type="checkbox"/> Below Average	<input type="checkbox"/> Don't Know
Reliability	<input type="checkbox"/> Above average	<input type="checkbox"/> Average	<input type="checkbox"/> Below Average	<input type="checkbox"/> Don't Know
Ability to Listen	<input type="checkbox"/> Above average	<input type="checkbox"/> Average	<input type="checkbox"/> Below Average	<input type="checkbox"/> Don't Know
Human Relations Skills	<input type="checkbox"/> Above average	<input type="checkbox"/> Average	<input type="checkbox"/> Below Average	<input type="checkbox"/> Don't Know
Intelligence	<input type="checkbox"/> Above average	<input type="checkbox"/> Average	<input type="checkbox"/> Below Average	<input type="checkbox"/> Don't Know
Speaking Skills	<input type="checkbox"/> Above average	<input type="checkbox"/> Average	<input type="checkbox"/> Below Average	<input type="checkbox"/> Don't Know
Moral Values	<input type="checkbox"/> Above average	<input type="checkbox"/> Average	<input type="checkbox"/> Below Average	<input type="checkbox"/> Don't Know
Faithfulness Practicing the Catholic Faith	<input type="checkbox"/> Above average	<input type="checkbox"/> Average	<input type="checkbox"/> Below Average	<input type="checkbox"/> Don't Know
Confidentiality	<input type="checkbox"/> Above average	<input type="checkbox"/> Average	<input type="checkbox"/> Below Average	<input type="checkbox"/> Don't Know
Ability to Handle Life Situations	<input type="checkbox"/> Above average	<input type="checkbox"/> Average	<input type="checkbox"/> Below Average	<input type="checkbox"/> Don't Know

Considering all that you know about the candidate and their personal characteristics, family life, and motivation for becoming a spiritual director, what is your overall evaluation of the candidate? The candidate is – (Please choose one)

Top notch Very good Acceptable Not recommended

Please explain below:

Thank you for taking the time to fill out this reference form. Please provide your information below:

Your name:

Your mailing address:

Your email address:

Phone number:

Signature:

Date:



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