



**Franciscan University of Steubenville
School of Spiritual Direction**

Applicant Name: _____

The above named person has made an application for admission to the School of Spiritual Direction at Franciscan University of Steubenville 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 FUS School of Spiritual Direction program and will not be shared with the applicant.**

Please complete this form and email it to ssd@franciscan.edu. Thank you for your help and cooperation.

If you have any questions regarding this form, please contact our Office Manager, Cadie Krivoniak, at the following email and phone number: cbkrivoniak@franciscan.edu (740) 283-6402

(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/her (e.g., pastor, spiritual director, religious superior, colleague, ministry team member, small group member, etc.)? (No relatives).

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

Is there anything about the applicant's history that concerns you regarding his/her 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 his/her ability to perform in service to the Church?

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

Honesty/Integrity	Above Average	Average	Below Average	Don't Know
Reliability	Above Average	Average	Below Average	Don't Know
Ability to Listen	Above Average	Average	Below Average	Don't Know
Human Relations	Above Average	Average	Below Average	Don't Know
Intelligence	Above Average	Average	Below Average	Don't Know
Speaking Skills	Above Average	Average	Below Average	Don't Know
Moral Values	Above Average	Average	Below Average	Don't Know
Faithfulness in Practicing the Catholic Faith	Above Average	Average	Below Average	Don't Know
Confidentiality	Above Average	Average	Below Average	Don't Know
Ability to Handle Life Situations	Above Average	Average	Below Average	Don't Know

Considering all that you know about the applicant and his/her personal characteristics, family life, and motivation for becoming a spiritual director, what is your overall evaluation of the applicant? The applicant 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:

Date:



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