Within the context of its theological convictions and mission, Dallas Theological Seminary does not discriminate on the basis of race, color, sex, age, national and ethnic origin, or disability.
This is a self-managed application. You control the gathering and submitting of all credentials necessary to complete your application. Please collect all required documentation and submit it to the Admissions Office at Dallas Theological Seminary in a single, oversized envelope, along with a $75 application fee (Check made payable to: DTS). The fee includes processing of the application and a personal background check.

These instructions are designed to answer some of the questions commonly asked about applying for admission. If you have questions that are not answered by these instructions or the catalog, please call the D.Min. Office at 800-992-0998, ext. 3734.

All application items must be received in the Admissions Office no later than the following dates:
- Winter Courses, August 15
- Summer Courses, February 15

The following instructions correspond to the specified sections of the application for admission. Those wishing to apply for nondegree D.Min. status should check the statements in the application that are in bold print.

1. PERSONAL IDENTIFICATION
   Please help us identify you by name and location.

2. COURSE OF STUDY
   You should select the course of study that best aligns with your ministry goals and your purposes in pursuing a D.Min. degree at Dallas Theological Seminary.

3. ACADEMIC BACKGROUND
   Your application must include transcripts of your work at every graduate-level institution where you completed (or will have completed) 12 or more semester hours. This includes, but is not limited to, schools from which you transferred work to earn a degree at another school. You should request that transcript(s) be sent to the DTS Admissions Office. If you do not remember the address of your school, check the Internet, or call our Admissions Office and we will try to find it. Your signature is required to request your transcript. A school cannot send your transcript without your signature on the request. Be aware that some schools charge a fee for providing a transcript.

4. REFERENCES
   You must list three people who know you well and have agreed to serve as references for you. One of your references should be from your church or organization’s board chairman or executive director. The second reference should be from one of your seminary professors or a professional associate. We ask that your references not be related to you, such as a parent or parent-in-law, brother-in-law, etc. For nondegree applicants, only one reference form is required from the chairperson/executive.

   Your self-managed application requires you to distribute and collect the attached reference forms. You should first complete the top of each form by printing your name and address. With the reference form, give your reference a self-addressed, stamped, security-style business envelope and ask him or her to complete the form, seal it in the envelope, sign across the envelope flap, and send it back to you. When you receive the returned reference form, do not open it but submit it unopened with your application.

5. CHURCH RELATIONSHIP
   Please indicate the name and location of the church with which you are affiliated and whether you are licensed and/or ordained.

   Ask your minister, chairman of deacon or elder board or appropriate officer to write a letter: (1) confirming membership or regular participation in good standing, (2) endorsing your promise for the D.Min. program, and (3) confirming the length of time and description of your involvement in that ministry. This letter is in addition to the pastoral reference requested above. If your ministry is not with a church, please ask for a similar endorsement from your supervisor.

   As with the references, the ministry should send the statement to you with the ministry official’s signature across the flap, and you should submit it unopened with your application.
6. PERSONAL STATUS
Please specify your marital status, your sex, your spouse's name, and whether you or your spouse have been divorced. If you are engaged, substitute “fiancé” or “fiancée” for “spouse” throughout this section.

If either you or your spouse has been divorced, please submit a statement discussing each occurrence. The fact that you have been divorced does not mean you will not be admitted. However, the D.Min. committee must understand the situation(s) in order to evaluate your potential for success in seminary study and in future ministry. For each divorce, please discuss when and why it occurred (including contributing causes), counseling which may have occurred before the divorce, who filed for the divorce, attempts at reconciliation, the resolution (including the status of children from the marriage), your view of biblical teaching on divorce and remarriage, and how you feel the divorce may affect your future ministry.

If you are separated but not divorced, please contact the director of D.Min. studies as each situation is considered on a case-by-case basis.

7. CITIZENSHIP
Please specify your citizenship status.

8. ENGLISH PROFICIENCY
The demonstration of English proficiency is required of all applicants for whom English is not the native or birth language. This applies even if the applicant is a United States citizen, has attended an American or English-speaking school, and/or is a long-term resident of an English-speaking country. Consult the catalog for details on registering to take these English proficiency tests. If you need to submit English proficiency scores and have not already made plans to take the required tests, you should make these plans before applying.

9. BIOGRAPHICAL FACTS ABOUT THE APPLICANT
In 500 words or less, please attach a narrative (not a list) describing the following areas: what a person must do to receive eternal life and when you took that step of faith, people who have influenced you significantly, turning points on your spiritual journey, and a description of your family.

10. MINISTRY QUESTIONNAIRE
On a separate sheet of paper, please answer the questions listed on the application.

11. LIFESTYLE COMMITMENT
Please affirm your commitment to the Seminary's standards of conduct for students.

12. DOCTRINAL QUALIFICATIONS
Please affirm your adherence to these specific doctrines. If you have questions about these doctrines which are not clarified by our Doctrinal Statement in the back of the catalog, please contact the Admissions Office.

ADDITIONAL INFORMATION
This information will not be considered when the Admissions Committee evaluates your application. We need this information for statistical reporting purposes, to get to know you better, and to “link” you into the Seminary family after acceptance. If you prefer, you may submit this information after you have been accepted.
1. PERSONAL IDENTIFICATION

______________________________      _________________________      ___________________________________________
Last or family name, first name, middle name                  Name you go by                          Social Security number

________________________________________________________________________________________
Other name under which you attended college:  __________________________________________________________________________________________

_______________________________________________________________________________   (                ) _____________________________________
Present mailing address           Home phone

_______________________________________________________________________________   (                ) _____________________________________
Work phone (if we may contact you there)

_______________________________________________________________________________   (                ) _____________________________________
Permanent mailing address (if different from above)

_______________________________________________________________________________   (                ) _____________________________________
Phone

Cell phone (     ) _________________________________   Email address ___________________________________________________________

Date of birth: _____________________________________  Place of birth: ____________________________________________________________________

Where do you consider your hometown to be?

2a. COURSE OF STUDY  (check one program):

☐ Nondegree D.Min. (if choosing this option skip to 2b.)
☐ Degree Program

D.Min. Tracks (check one track):

☐ Christian Education Track (select an emphasis from below)
   ☐ General Emphasis
   ☐ Women in Ministry Emphasis (modified cohort)

☐ Ministry Leadership Track (select an emphasis from below)
   ☐ General Emphasis
   ☐ Pastors of Large Churches Emphasis (modified cohort)
   ☐ Executive/Associate Pastors Emphasis (modified cohort)
   ☐ Marriage & Family Ministries Emphasis

2b. STARTING TERM: When do you plan to begin your studies?

☐ Winter of year ____________ (begins October 15, with classes meeting in January)
☐ Summer of year _____________ (begins April 15, with classes meeting in July)
3. ACADEMIC BACKGROUND
For each school attended for your graduate degree(s), give:

<table>
<thead>
<tr>
<th>Name of institution</th>
<th>Attended</th>
<th>Degree or diploma</th>
<th>Year degree was/will be received</th>
<th>Check if less than 12 hours completed</th>
</tr>
</thead>
<tbody>
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<td>from/to</td>
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</table>

Please request that an official transcript be sent by each school to the DTS Admissions Office. If you are a graduate of Dallas Theological Seminary, your transcript will be added to your application automatically.

Have you ever been expelled or suspended by any school?  
Yes  □  No  □
Are you under any kind of disciplinary action or pending action by any school?  
Yes  □  No  □
If yes to either question, attach a statement describing the situation.

4. REFERENCES
Please have the reference forms completed, and request that your references return each of them to you in a sealed envelope with his or her signature across the flap. The first reference should be from your church or organization’s chairperson or executive director. The second reference should be from one of your seminary professors or a professional associate. The third reference should be from a friend. For nondegree D.Min. admission, only the Chairperson/Executive reference is required. NOTE: Reference forms should not be completed by someone who is related to you by birth or marriage.

<table>
<thead>
<tr>
<th>Name of Chairperson/Executive</th>
<th>Position</th>
<th>Phone</th>
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<tbody>
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Address (include zip code)  
Email

<table>
<thead>
<tr>
<th>Name of Educational or Professional Reference</th>
<th>Position</th>
<th>Phone</th>
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<tbody>
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</tbody>
</table>

Address (include zip code)  
Email

<table>
<thead>
<tr>
<th>Name of Friend Reference</th>
<th>Position</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Address (include zip code)  
Email

5. CHURCH RELATIONSHIP
Name and location of local church where you are a member or in current fellowship:

With what ecclesiastical body is this church affiliated?

Are you licensed?  □ Yes  □ No  
Are you ordained?  □ Yes  □ No
Please request a letter from the official board of your church stating (1) your membership or participation in good standing, (2) their endorsement of you as having promise for the D.Min. program, and (3) the length of time and description of your involvement in this ministry. If your ministry is with an organization other than your church, please request a similar endorsement letter from them. The letter should be in a sealed envelope with the church official’s signature across the sealed flap. (This is not required for nondegree D.Min. admission.)
6. PERSONAL STATUS

Sex: □ Male  □ Female

Marital status: □ Single □ Married □ Engaged □ Widowed
(If engaged, please substitute “fiancé” or “fiancée” for “spouse” below.)

Have you ever been divorced or are you now separated? □ Yes □ No

Spouse’s name: _________________________________________________________________________________________________________________

Spouse’s date of birth: __________________________ Date of marriage: __________________________

Has your spouse ever been divorced? □ Yes □ No

Is your spouse supportive of you enrolling in the D.Min. program? □ Yes □ No

7. CITIZENSHIP

Are you a/an (check one):

□ Citizen of U.S.A. by birth?
□ Naturalized citizen of the U.S.A.? When? __________________________________________________________________
□ Permanent resident or resident alien (holder of green card)?
□ International student coming on a visa? What type of visa? __________________________________________________________________

If you are a permanent resident or international student, what is your country of citizenship? __________________________

8. ENGLISH PROFICIENCY

Is English your native or birth language? □ Yes □ No (If yes, skip to section 9, Biographical Facts about the Applicant).

Applicants for whom English is not his or her native or birth language must take the Test of English as a Foreign Language (TOEFL) and the Test of Written English (TWE). This applies even if the applicant is a U.S. citizen, has attended American or English-speaking schools, and/or is a longtime resident of an English-speaking country. The Institution Code for reporting TOEFL/TWE scores to DTS is 6156. The TWE is included in the computer-based and Internet-based TOEFL test.

Have you taken the TOEFL test previously? □ Yes □ No
If yes, please list the dates and scores: __________________________
If no, please list the date TOEFL will be taken: __________________________

Note: If you have taken the TOEFL test more than two times, please contact the Admissions Office.

9. BIOGRAPHICAL FACTS ABOUT THE APPLICANT

These questions are to guide you in presenting yourself to the Doctor of Ministry committee. You may choose to submit your own statement covering all of these areas.

LIFE STORY
In 500 words or less, please attach a narrative (not a list) describing the following areas: what a person must do to receive eternal life and when you took that step of faith, people who have influenced you significantly, turning points on your spiritual journey, and a description of your family.

CHRISTIAN MINISTRY
What is your present Christian ministry? (Give your position, church or organization, and address.)

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

What books or articles have you had published? ____________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
Of what professional societies or associations are you a member?
__________________________________________________________________________
__________________________________________________________________________

What foreign countries have you visited? ___________________________________________________________________________________
__________________________________________________________________________

What special honors have you received? ___________________________________________________________________________________
__________________________________________________________________________

What other facts would help the D.Min. committee evaluate your experience in ministry?
__________________________________________________________________________
__________________________________________________________________________

How is your health at present? _______________________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Have you ever been under mental or emotional health care? □ Yes □ No
If yes, what has been the resolution of the care and what ongoing care is in process?
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

What is your plan for meeting the expenses of D.Min. study? __________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

What is your plan for scheduling the time to adequately complete the requirements of the D.Min. program? What commitment have you received from your ministry organization that you will actually have this time?
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Have you been charged with a misdemeanor or felony offense? (This would include any appearance in court for any misdemeanor or felony accusation regardless of dismissal or conviction. NOTE: Background checks will be done on all acceptable candidates.) □ Yes □ No
If yes, please discuss the circumstances and the resolution of any conviction.
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
10. MINISTRY QUESTIONNAIRE (This is not required for nondegree D.Min. admission.)
The purpose of this questionnaire is to help us get to know you, your vision for ministry, your successes and struggles, and your perspective on various theological and biblical issues. This questionnaire will also help to keep us in tune with ministry issues that relate to you and provide us with a sample of your writing skill. Feel free to use a Bible. Make your answers as complete and concise as possible, using an attached page for your response.

1. What has your ministerial experience included? (List the years you served in each ministry.)

2. What are the indications of growth in your ministry?

3. What is your philosophy of ministry?

4. What are your future ministry plans?

5. Why are you interested in the DTS D.Min. program?

6. What area of theology represents your greatest interest right now? How are you pursuing it, and how are you integrating it into your ministry?

7. What doctrinal issue most impacts, positively or negatively, your ministry and how does it do so?

8. What biblical model or approach have you found to be successful in conflict resolution and why?

9. What is the number-one problem you face in ministry? Discuss how the Scriptures address the problem.

10. What books have you read in the last year, and what journals and magazines do you read regularly? What conferences, seminars, or videos have significantly influenced your thinking?

11. LIFESTYLE COMMITMENT
While the Seminary recognizes the freedom of each student to develop under the leadership of the Holy Spirit, students at the Seminary are recognized as Christian leaders by people in the community. Therefore certain standards of conduct and appearance are to govern the student body (Rom. 14:21–22). The use of tobacco and the use of alcoholic beverages (except for liturgical, ceremonial, medicinal, or other exceptional instances) are not considered suitable for the Seminary faculty, staff, and students.

As representatives of Jesus Christ, students are responsible to demonstrate a lifestyle consistent with His character and are expected to be men and women of high moral character and whose sexual conduct is consistent with the standards of Scripture. This includes abstaining from any pattern of addiction and from homosexual, premarital, and extramarital sexual conduct.

Do you agree to abide by the standards of conduct stated above?  □ Yes  □ No

12. DOCTRINAL QUALIFICATIONS
Have you read the Doctrinal Statement of the Seminary in its entirety? (It is located in the catalog or We Believe booklet or online at www.dts.edu/aboutdts.)  □ Yes  □ No

Every member of the faculty affirms his or her full agreement with the Doctrinal Statement every year. Students (to be admitted and to graduate) must adhere to the following doctrines:

• the authority and inerrancy of Scripture
• the Trinity
• the full deity and humanity of Christ
• the spiritual lostness of the human race
• the substitutionary atonement and bodily resurrection of Christ
• salvation by faith alone in Christ alone and
• the physical return of Christ.

Do you adhere to the above doctrines?  □ Yes  □ No

In the interest of campus unity, do you agree not to promote views contrary to the Doctrinal Statement of the Seminary?  □ Yes  □ No

I promise, in submission to the Holy Spirit’s guidance, that if admitted to Dallas Seminary I will at all times conduct myself as a Christian, faithfully and diligently apply myself to the studies as required by the Seminary curriculum, promptly meet all financial and other obligations, carefully observe the rules and regulations as set forth by the Seminary and its faculty, and submit to the authority of the faculty and administration. (I understand that faithful adherence to this promise is expected throughout my seminary career.) I also affirm that the facts in this application and accompanying biographical statement(s) are true to the best of my knowledge.

______________________________  ______________________
Signature of Applicant                          Date
INCOMING STUDENT INFORMATION
This information will not be used in considering you for admission. If you wish, you may submit this page after acceptance.

Ethnic origin (required for statistical reporting purposes):

☐ Nonresident Alien (i.e., will attend DTS under a ___________________________ [fill in] visa status)
☐ American Indian or Alaskan native ☐ Black or African-American ☐ White, non-Hispanic
☐ Asian or Pacific Islander ☐ Hispanic ☐ Other

Please list any physical disabilities or limitations, such as blindness or hearing problems, for which you will need accommodation.

________________________________________________________________________________________________________________________________

Name and address of parent(s):
________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________

Parent(s) phone: (          ) _______________________________________

May we send your parents Kindred Spirit magazine? ☐ Yes ☐ No

Name and address of parents-in-law: _____________________________________________
________________________________________________________________________________________________________________________________
________________________________________________________________________________________________________________________________

Phone of parents-in-law: (          ) _______________________________________

May we send your parents-in-law Kindred Spirit magazine? ☐ Yes ☐ No

How did you first hear about Dallas Theological Seminary? ____________________________________________

What or who prompted you to apply to Dallas Seminary? ____________________________________________

Are you a veteran who will receive veteran’s benefits during your studies? ☐ Yes ☐ No

What musical/artistic abilities, hobbies, and interests do you have? ____________________________________________
________________________________________________________________________________________________________________________________

Please indicate in which of the following campus or Christian groups you have leadership experience:

☐ Baptist Student Union ☐ Campus Life ☐ Navigators
☐ Bible Study Fellowship ☐ Fellowship of Christian Athletes ☐ Young Life
☐ Campus Crusade for Christ ☐ InterVarsity Christian Fellowship ☐ Other: ____________________________

________________________________________________________________________________________________________________________________

Your name (signature)

________________________________________________________________________________________________________________________________

Your name (printed)
This section is to be filled out by the applicant.

Name

Address

City, State, Zip

This section is to be filled out by the reference.

How long have you known the applicant? ___________________ You have been the applicant’s:

☐ Teacher   ☐ Pastor   ☐ Friend   ☐ Employer   ☐ Adviser   ☐ Other ______________________________

The individual named above has given your name as a reference in applying for entrance to our seminary in the Doctor of Ministry program. We rely on people like you to help us accurately appraise our incoming students. We appreciate your honest estimate of this applicant’s personality and character traits, and will treat your reply as confidential. It is the policy of Dallas Seminary that reference forms are NOT made available to the applicant and will be destroyed when he or she begins studies. This includes identifying positive or negative situations which would help us evaluate the applicant’s ministry effectiveness.

Each applicant for admission must submit a recommendation from the chairperson of the board or other executive of the organization in which the applicant served. Serious consideration is given to this recommendation, and therefore we request that you complete the form carefully and candidly and return it to the applicant in a sealed envelope with your signature across the flap.

1. How well do you know the applicant? ____________________________________________________________

2. Please give what information you can regarding the applicant’s family life. ____________________________________________

3. Please give what information you can regarding the applicant’s business life. ____________________________________________

4. Does the applicant relate well with others? ____________________________________________________________

5. Does the applicant work well with others? ____________________________________________________________

6. What do you consider the applicant’s strongest talents and abilities? ____________________________________________

7. What do you consider the applicant’s weak points? ________________________________________________________
8. Have you observed weaknesses in the applicant's moral life? □ Yes □ No
   (If yes, please explain.) __________________________________________________________
   __________________________________________________________

9. Please rate the candidate by circling the appropriate response for each of the qualities below. If you wish, describe briefly and concretely specific instances that support or interpret your judgment. Do not circle items of which you feel uncertain or that you have had no opportunity to observe.

<table>
<thead>
<tr>
<th>Quality</th>
<th>Below Average</th>
<th>Average</th>
<th>Above Average</th>
<th>Strong</th>
<th>Exceptional</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spiritual life</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Initiative</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Industry</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Follow-through</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
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<tr>
<td>Influence on others</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Acceptance by others</td>
<td>1</td>
<td>2</td>
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<td>5</td>
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<tr>
<td>Responsibility</td>
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<tr>
<td>Leadership</td>
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<td>4</td>
<td>5</td>
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<tr>
<td>Humility</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
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<tr>
<td>Ability to communicate</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Personal organization</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Emotional qualities</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Personal appearance</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Overall evaluation</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
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</tbody>
</table>

10. Additional comments __________________________________________________________
    __________________________________________________________
    __________________________________________________________
    __________________________________________________________

If there are additional facts which we should know, please write them on a separate sheet. You may include the names and addresses of additional references who you think would be of help in evaluating this application. Thank you.

______________________________________   ______________________________________
Signature                Position & Organization

______________________________________   ______________________________________
Name (please print)               Address

______________________________________   ______________________________________
Date                        City, State, Zip

______________________________________   ______________________________________
Email                      Phone

To increase the applicant's control over the timetable of the application process, we are using a self-managed application. Please (1) seal the reference in an envelope, (2) sign across the flap, and (3) return the sealed envelope to the applicant for him or her to include in the application.
**SEMINARY PROFESSOR’S OR PROFESSIONAL’S RECOMMENDATION**

DALLAS THEOLOGICAL SEMINARY  
ADMISSIONS OFFICE • 3909 SWISS AVENUE • DALLAS, TX 75204 • 800-992-0998, EXT. 3661 • FAX 214-841-3664

**This section is to be filled out by the applicant.**

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<tr>
<td>Address</td>
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<tr>
<td>City, State, Zip</td>
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</tbody>
</table>

**This section is to be filled out by the reference.**

How long have you known the applicant? ___________________ You have been the applicant’s:

- [ ] Teacher
- [ ] Pastor
- [ ] Friend
- [ ] Employer
- [ ] Adviser
- [ ] Other ___________________

The individual named above has given your name as a reference in applying for entrance to our seminary in the Doctor of Ministry program. We rely on people like you to help us accurately appraise our incoming students. We appreciate your honest estimate of this applicant’s personality and character traits, and will treat your reply as confidential. It is the policy of Dallas Seminary that reference forms are NOT made available to the applicant and will be destroyed when he or she begins studies. This includes identifying positive or negative situations that would help us evaluate the applicant’s ministry effectiveness.

Please fill out this reference form at your earliest possible convenience and return it to the applicant in a sealed envelope with your signature across the flap.

For each number, please check one term that best applies.

**1. Teachability**
- [ ] Repeated encouragement necessary
- [ ] Slow but learns readily
- [ ] Superior

**2. Dependability**
- [ ] Not dependable
- [ ] Needs supervision
- [ ] Usually reliable
- [ ] Thoroughly dependable

**3. Judgment**
- [ ] Unable to make decisions
- [ ] Makes snap judgments
- [ ] Uses good common sense
- [ ] Shows superior judgment

**4. Initiative**
- [ ] Needs constant supervision
- [ ] Relies somewhat on others
- [ ] Ably carries out assignments
- [ ] Anticipates needs; is resourceful

**5. Accuracy**
- [ ] Too many errors
- [ ] Somewhat accurate
- [ ] Satisfactory
- [ ] High degree of accuracy
If there are additional facts that we should know, please write them on a separate sheet. You may include the names and addresses of additional references whom you think would be of help in evaluating this application.

Thank you.

______________________________________  ______________________________________
Signature   Position & Organization

______________________________________  ______________________________________
Name (please print)  Address

______________________________________  ______________________________________
Date   City, State, Zip

______________________________________  ______________________________________
Email   Phone

To increase the applicant's control over the timetable of the application process, we are using a self-managed application. Please (1) seal the reference in an envelope, (2) sign across the flap, and (3) return to the sealed envelope to the applicant for him or her to include in the application.

---

6. Quality of work
   - Careless
   - Acceptable but needs improvement
   - Entirely satisfactory
   - Outstanding

7. Quantity of work
   - Has to be prodded
   - Acceptable but needs improvement
   - Is a good producer
   - Is an unusually rapid worker

8. Attitude toward studies
   - Definitely uninterested
   - Rather matter-of-fact
   - Industrious
   - Enthusiastically interested

9. Attitude toward fellow students or colleagues
   - Reluctant to cooperate
   - Makes little contribution
   - Gets along well with others
   - Helps others

10. Attitude toward teachers or those in authority
    - Difficult to handle
    - Somewhat unresponsive
    - Generally cooperative
    - Unusually helpful and cooperative

Have you found the applicant consistently honest? [ ] Yes [ ] No
If not, please comment. (If you do not have sufficient space, please use another sheet of paper.)

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
This section is to be filled out by the applicant.

Name

Address

City, State, Zip

This section is to be filled out by the reference.

How long have you known the applicant? ___________________ You have been the applicant’s:

☐ Teacher ☐ Pastor ☐ Friend ☐ Employer ☐ Adviser ☐ Other ______________________________

The individual named above has given your name as a reference in applying for entrance to our seminary in the Doctor of Ministry program. We rely on people like you to help us accurately appraise our incoming students. We appreciate your honest estimate of this applicant’s personality and character traits, and will treat your reply as confidential. It is the policy of Dallas Seminary that reference forms are NOT made available to the applicant and will be destroyed when he or she begins studies. This includes identifying positive or negative situations that would help us evaluate the applicant’s ministry effectiveness.

Please fill out this reference form at your earliest possible convenience and return it to the applicant in a sealed envelope with your signature across the flap.

1. How well do you know the applicant? _________________________________________________________________________________________

2. Please give what information you can regarding the applicant's church life. ____________________________________________________________

_______________________________________________________________________________________

3. Please give what information you can regarding the applicant’s family life. ____________________________________________________________

_______________________________________________________________________________________

4. Please give what information you can regarding the applicant’s social and business life. ____________________________________________

_______________________________________________________________________________________

5. Does the applicant relate well to others? _____________________________________________________________________________________

_______________________________________________________________________________________

6. Does the applicant work well with others? _____________________________________________________________________________________

_______________________________________________________________________________________

7. What do you consider the applicant's strongest talents or abilities? __________________________________________________________________

_______________________________________________________________________________________

8. What do you consider the applicant’s weak points? _____________________________________________________________________________

_______________________________________________________________________________________

FRIEND’S RECOMMENDATION

ADMISSIONS OFFICE • 3909 SWISS AVENUE • DALLAS, TX 75204 • 800-992-0998, EXT. 3661 • FAX 214-841-3664
9. What degree of ministry success do you assess for the applicant? _____________________________________________________________

10. Have you observed weaknesses in the applicant’s moral life? __________________________________________________________

If so, please explain. ____________________________________________________________________________________________

____________________________________________________________________________________________________________________

11. Do you feel the applicant is a worthy candidate for Doctor of Ministry studies at Dallas Theological Seminary?

____________________________________________________________________________________________________________________

12. Please rate the candidate by checking the item which best applies under each of the headings below.

If you wish, describe briefly and concretely specific instances that support or interpret your judgment.

Do not check items of which you feel uncertain or in which you have had no opportunity to observe.

**Spiritual Life**

- No interest in spiritual growth
- Small evidence of spiritual growth
- Average spirituality
- Shows growth & separated living
- Deeply spiritual
- Do not know

**Purposefulness**

- Aimless, trifler
- Vacillating in purpose
- Average, Self-directed
- Strives to realize well-formed purpose
- Do not know

**Initiative**

- Requires constant oversight
- Succeeds if always directed
- Average, occasional initiative
- Shows good initiative
- Actively creative
- Do not know

**Industry**

- Needs constant prodding
- Needs occasional prodding
- Performs assigned tasks
- Goes beyond what is required
- Seeks additional work
- Do not know

**Influence on others**

- Detrimental influence
- Passive, no positive influence
- Varying influence
- Consistently good influence
- Unusually wholesome influence
- Do not know

**Acceptance by others**

- Avoided by others
- Tolerated by others
- Liked by others
- Well liked by others
- Sought after by others
- Do not know

**Responsibility**

- Irresponsible
- Somewhat dependable
- Usually reliable
- Conscientiously reliable
- Capable of much responsibility
- Do not know

**Leadership**

- Always a follower
- Tries but usually fails at leadership
- Assumes occasional leadership
- Good leadership
- Inspiring & successful leader
- Do not know

**Emotional qualities**

- Apathetic
- Too emotional
- Usually well balanced
- Consistently well balanced
- Emotionally very stable
- Do not know

If there are additional facts that we should know, please write them on a separate sheet. You may include the names and addresses of additional references whom you think would be of help in evaluating this application.

Thank you.

______________________________________  ______________________________________
Signature   Position & Organization

______________________________________  ______________________________________
Name (please print)   Address

______________________________________  ______________________________________
Date    City, State, Zip

______________________________________  ______________________________________
Email    Phone

To increase the applicant’s control over the timetable of the application process, we are using a self-managed application. Please (1) seal the reference in an envelope, (2) sign across the flap, and (3) return the sealed envelope to the applicant for him or her to include in the application.
Applicant: Please photocopy this form, complete it (including signature), and send it to each graduate level institution you have attended where you have completed at least 12 semester hours.

TO:

_____________________________________________________
Registrar

_____________________________________________________
Name of Institution

_____________________________________________________
Address of Institution

Please send a copy of my academic transcript for the purpose of application for admission to:

Admissions Office
Dallas Theological Seminary
3909 Swiss Avenue
Dallas, Texas 75204

The Seminary asks you, as registrar, to please sign across the sealed envelope flap.

<table>
<thead>
<tr>
<th>Name by which I attended your school</th>
<th>Applicant’s signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>Years of attendance</td>
<td>Applicant’s name (printed)</td>
</tr>
<tr>
<td>Degree(s) earned</td>
<td>Applicant’s Address</td>
</tr>
<tr>
<td>Social Security number</td>
<td>City, State, Zip</td>
</tr>
<tr>
<td>Date of birth</td>
<td>( ) Daytime phone</td>
</tr>
</tbody>
</table>
This section is to be filled out by the applicant.

_____________________________________________________________
Name
_____________________________________________________________
Address
_____________________________________________________________
City, State, Zip

This section is to be filled out by the church or ministry.

Dear church or ministry officer:

The person stated above is applying for admission to Dallas Theological Seminary. We ask that you validate the following areas regarding the applicant:

(1) The applicant’s membership or regular participation in good standing.
(2) The church or ministry’s endorsement of the applicant’s promise for the D.Min. program.
(3) The length of time and description of the applicant’s involvement in this ministry.

If the applicant is not a member but is a regular attender, please qualify your statement accordingly.

The Admissions committee prefers you use your church or ministry letterhead to write this statement. If this is not feasible, you may make your statement on this form. Be sure the statement is signed and includes the title or position of the signer.

Please (1) seal the church or ministry endorsement in an envelope, (2) sign across the flap, and (3) return the sealed envelope to the applicant for him or her to include in the application.

Admissions Office
Dallas Theological Seminary
3909 Swiss Avenue
Dallas, TX 75204

If not using church or ministry letterhead, please use the space below (and on the back if necessary) to write your statement.

Signature ____________________________________________________ Date ________________________________________________________

Name ______________________________________________________ Position ___________________________________________________
(please print)                                                                                                         

Name of church or ministry __________________________________________ Address ___________________________________________

Phone ( ) ____________________________________________________