



PBBC
 P A C I F I C
 BAPTIST BIBLE
 C O L L E G E

Director of Admissions
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 FAX (562) 424-3324
 admissions@pacificbaptistbiblecollege.com

Personal Reference

Please fill out as carefully and completely as possible. Please print.

Applicant

This portion is to be completed by the applicant:

Name of Applicant: _____ Date of Enrollment or Graduation: _____
 Social Security Number: _____ Birth Date: _____
 Home Address: _____ Phone Number: (____) _____
 City: _____ State: _____ Zip: _____
 Name of Friend: _____

I am authorizing the release of the following information to be considered in my application for admission to Pacific Baptist Bible College and understand that the information will be held in confidence by the college and will not be released to me or to anyone else. I understand that this questionnaire will be mailed to Pacific Baptist Bible College by the person completing the information below.

Signature of Applicant: _____ Date: _____

Referent

This portion is to be completed by the referent. **Please do not return this form to the applicant.** Please complete and send this form **in a sealed envelope** to the Admissions Office at your earliest convenience. Thank you.

Your Name: _____
 Relationship to the Applicant: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone Number: (____) _____ E-mail: _____

When considering this applicant, would you recommend him/her?

with enthusiasm Yes With caution* No*

**Please state the reason on the back of this sheet.*

How long have you known the applicant? _____ years _____ months

Does this applicant pay his bills on time? Yes As far as I know No Unknown

Would you hire this applicant to work for you? Yes No If no, please explain. _____

Is this applicant the kind of person with whom you would want your son or daughter to be close friends?

Yes No If No, please explain. _____

Please list any significant factors in the applicant's background which we should know. _____

Please rate the applicant on the following items.

CHRISTIAN CHARACTER	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Average	<input type="checkbox"/> Poor	<input type="checkbox"/> Unknown
DEPENDABILITY	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Average	<input type="checkbox"/> Poor	<input type="checkbox"/> Unknown
COOPERATION	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Average	<input type="checkbox"/> Poor	<input type="checkbox"/> Unknown
GENERAL INTELLIGENCE	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Average	<input type="checkbox"/> Poor	<input type="checkbox"/> Unknown
ABILITY TO GET ALONG WITH OTHERS	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Average	<input type="checkbox"/> Poor	<input type="checkbox"/> Unknown

