

Religious Formation Ministry Programme

RECOMMENDATION FORM

Applicant's Family Name First Name
Address
Referee's Name
Position
How long have you known the applicant?
In what relationship?
1. What strengths do you recognise in this applicant?
2. What areas do you identify for further growth?
3. In what ways do you think this programme can facilitate the applicant's human and spiritual growth?
4. Based on your knowledge of the applicant, where do you anticipate she/he may experience the greatest challenge in this programme?



Please return this form to: Jennifer Burke RIM		
E-1	mail	
Te	l. No. Mobile/Cell	
Address		
Signed Date		
7.	Other information you consider to be relevant to the consideration of this application?	
6.	How would you describe the applicant's present state of physical and psychological health?	
5.	In what role would you hope to see the applicant exercising leadership in the future?	
4	In what role would you hone to see the applicant avaraging leadarship in the futuro'	

Jennifer Burke RJM
The Director
Religious Formation Ministry Programme
Clonmore House,
St. Raphaela's School Campus,
St. Raphaela's Road,
Kilmacud Road Upper,
Stillorgan,
Co. Dublin, Ireland
A94 R7N8
Tel: 089 469 6892

http://www.loretohouse.com