

Department of Chaplaincy Services and Pastoral Education

Letter of Reference for Clinical Pastoral Education

CPE CANDIDATE:	Please fill out this portion of the form and supply copies to three references: one academic, one religious, and one personal.							
Name:								
Address:								
Phone:	Email:							
Program app Year of prog		_ Fall Extend	ed Summer	Resid	lency	SES		
REFERENCE GIVER:			eference for the be kept confid		med CPE	Candidate.		
Do not return this form to the candidate. Mail or fax directly to: Chaplaincy Services and Pastoral Education, University of Virginia Health System PO Box 800672, Charlottesville VA 22908-0672 FAX: (434) 924-1139								
Check one: I am providing a(n) □ academic; □ religious; □ personal reference for the above named candidate.								
1. Please evaluate the candidate on the following scale (check the appropriate boxes):								
Intellectual A General Kno Job Perseve Emotional m Creativity Interpersona Pastoral Effe	wledge rance aturity I Skills	Excellent	Very Good	Good	Weak	Very Weak		
2. How long	have you kr	own the car	ndidate, and in v	what capacit	:y?			

3.	How do you evaluate the candidate:	
	a. in his/her potential for pastoral effectiveness?	
	b. in his/her personal commitment to learning?	
	c. in his/her maturity of faith and depth of spiritual development?	
4.	Are you aware of any health problems that might affect this candidate's work?	
5.	If you were seriously ill and hospitalized, how would you feel about a pastoral visit from this applicant?	t
6.	Please elaborate on any of the rankings you indicated for the table in number 1.	
7.	What do you think of his/her plan to do clinical pastoral education? (motivation, attitude, readiness for an intensive program, ability to work in a group, etc.)	
Sig	nature Date	
 Ple	ease Print Name	