



Letter of Reference for Clinical Pastoral Education

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| <p>Please print, fill out and mail directly to</p> <p>Rev. John T. Crabb, SJ Director of Clinical Pastoral Education Catholic Health 992 North Village Avenue Rockville Centre, NY 11570</p> | <p>Program applied for:</p> <p>_____Extended Unit of CPE (part- time)</p> <p>_____Summer Unit of CPE</p> <p>_____Residency Unit (yearlong)</p> |
| <p>Candidate:</p> <p>Name: _____</p> <p>Address: _____</p> <p>City/State/Zip _____</p> <p>Phone: _____</p> <p>E-Mail _____</p> | <p>Reference giver:</p> <p>Name: _____</p> <p>Address: _____</p> <p>City/State/Zip _____</p> <p>Phone: _____</p> <p>E-Mail _____</p> |

Reference is to be mailed directly to Director of CPE by person making reference

1. How long have you known the candidate and in what capacity?

2. How do you evaluate the candidate in:
 - a. His/her effectiveness related to work, academics, spirituality, personal strengths?

 - b. His/her personal commitment to learning?

 - c. His/her maturity of faith and depth of spiritual development?

3. If you were hospitalized, how would you feel about him/her visiting you?



4. Please evaluate the candidate on the following scale:

| | Excellent | Very Good | Good | Weak | Very Weak |
|-------------------------|------------------|------------------|-------------|-------------|------------------|
| Intellectual Ability | | | | | |
| General Knowledge | | | | | |
| Job Perseveranc | | | | | |
| Emotional Maturity | | | | | |
| Creativity | | | | | |
| Pastoral Communication | | | | | |
| Ability to Self Reflect | | | | | |

5. Please elaborate on any of the above.

6. What do you think of his/her plan to do clinical pastoral education? (motivation, attitude, readiness, etc. for CPE.)

7. Additional remarks or comments.

Signature

Date

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