

**Coptic Orthodox Patriarchate of Alexandria  
Theological Enrichment Program  
Recommendation Letter**

Name of Church: \_\_\_\_\_ City: \_\_\_\_\_ Province: \_\_\_\_\_  
Name of Applicant: \_\_\_\_\_

- How long have you known the applicant? \_\_\_\_\_
- Are you his/her confession father?            Yes    No
- If yes, does he/she confess regularly?    Yes    No
- Does the applicant serve in the church?    Yes    No
- If yes, what kind of service?

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Please answer the following questions ranking the applicant on the scale of 1 to 5, where 5 is the highest score and 1 is the lowest rank. Circle the number corresponding to your assessment below.

In your assessment does the applicant:

	Below Average			Above Average	
	Poorly		Average		highly
1. Attend the Divine Liturgy regularly	1	2	3	4	5
2. Attend youth/church meetings regularly	1	2	3	4	5
3. Actively participate in the Church	1	2	3	4	5
4. Exhibit a pleasant personality	1	2	3	4	5
5. Demonstrate a commitment to service	1	2	3	4	5
6. Exhibit leadership skills	1	2	3	4	5
7. Appear motivated to serve	1	2	3	4	5
8. Receive a recommendation for this program	1	2	3	4	5

Please state the reasons why you feel the applicant should attend this program:

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Name of Priest: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_