



PERSONAL REFERENCE

**Student Instructions:** Fill out the personal information below and have the bottom completed by your references (instructors, advisors, high school teacher, employer, clergy, or other). **Forms from personal friends or relatives are not acceptable.**

Student Name: \_\_\_\_\_ Student ID#: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**Reference Instructions:** Thank you for agreeing to be a reference for this student. Please complete the information below to the best of your ability.

1. How long have you known the applicant and in what capacity?
  
  
  
  
  
  
  
  
  
  
2. What qualities best describe this applicant?
  
  
  
  
  
  
  
  
  
  
3. What other information do you think the committee should consider in assessing the applicant? (community service/work/involvement, school clubs, family circumstances, etc.)

\_\_\_\_\_  
Printed Name of Reference

\_\_\_\_\_  
Signature of Reference

\_\_\_\_\_  
Academic Affiliate/Title

\_\_\_\_\_  
Date

Please mail to: Executive Director, OFTC Foundation 560 Pinehill Road, Dublin, Georgia 31021. You may also email to [kaaron@oftc.edu](mailto:kaaron@oftc.edu) THESE FORMS ARE CONFIDENTIAL.