

Office of Admissions: 617-559-8643 • Fax: 617-559-8601 • Email: sjm@hebrewcollege.edu

REFERENCE FORM THE SCHOOL OF JEWISH MUSIC AT HEBREW COLLEGE CANTORIAL PROGRAM

Name of Applicant	
Reference Name	(Title)
Reference Address	
Reference Email	(Phone)
candid estimate of this applicant's intellectu	s applying for admission to the Cantorial program of the School of Jewish Music. Your tall performance, promise, personal qualities, musicianship and Jewish commitment will for admission. Please print and mail this form to the address below, or scan and email to
1. How long and in what capacity have yo	ou known the applicant?
2. Please rate the applicant in the following	ng areas, using numbers 1 through 5.
1 – cannot assess (if you have not had direc 2 – below average 3 – average 4 – above average 5 – superior	t contact with the applicant in that category.)
-	part of your discussion in answering question 4.
1. Native intellectual ability 2. Breadth of general knowledge 3. Jewish commitment 4. Vocal ability 5. Musicianship 6. Teaching ability 7. Leadership skills 8. Ability to work with others 9. Sensitivity to others 10. Self-awareness 11. Emotional maturity 12. Flexibility 13. Initiative 14. Perseverance 15. Performance skills 16. Passion for Jewish music 17. Ability in oral expression 18. Ability in written expression	
3. Please indicate your overall recommen	dation (indicate one choice with an "x")
Strongly recommend Recommend Recommend with minor reservation Recommend with substantial reservation Do not recommend candidate for admission Do not feel qualified to make a recommend	



personality. If you feel qualified to do so, please discuss the foll spiritual search; (b) the appropriateness of the choice of the cant interests; and (c) areas in which this candidate needs to work on	11 , 6
Signature	Date

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