To be completed by Student

Name ________________________________________  Phone ______________________

- I have waived my right of access to information included on this reference form. It is therefore confidential and will be seen only by the Admissions Committee.

- I have not waived my right of access to information included on this reference form. It will therefore be subject to my review upon request.

Signature ____________________________________  Date ____________________

To be completed by Reference:  To complete this form online, visit JohnsonU.edu/UndergraduateReference.

The person above has applied for admission to Johnson University and has submitted your name as a reference. If the applicant has waived right of access, your reference will remain confidential.

How long have you known the applicant? __________________________________________

What is your relationship with the applicant? _______________________________________

My last contact with the applicant was
- within the last month
- 1-6 months ago
- 7-12 months ago
- 1-2 years ago

<table>
<thead>
<tr>
<th>Please check the appropriate box</th>
<th>Excellent</th>
<th>Good</th>
<th>Average</th>
<th>Poor</th>
<th>Unknown</th>
</tr>
</thead>
<tbody>
<tr>
<td>Christian Example</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Character</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dependability</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Judgment</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maturity</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Motivation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personality</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Check one:
- I recommend this applicant without reservation. (Comment below.)
- I recommend this applicant with reservations. (Please explain below.)
- I do not know this applicant well enough or have sufficient information to give a reference.
- I do not recommend this applicant. (Please explain below.)

Comments or Explanations __________________________________________________________

_________________________________________  __________________________
Signature                                       Date

__________________________________________  ________________________
Print name                                      Phone

____________________________________________
Organization

Mail to:  Johnson University Tennessee
          Admissions Office
          7900 Johnson Drive, Knoxville, TN 37998
          or Fax to: 865.251.3333
- or -

Johnson University Florida
Admissions Office
1011 Bill Beck Boulevard, Kissimmee, FL 34744
or Fax to: 321.206.2007