



In partnership with Franciscan University
of Steubenville School of Spiritual Direction

**Pastor/Religious Superior
Assessment of Applicant**

Applicant's name

How long have you known the applicant? _____

How well do you know the applicant? (CHECK ONE) ☐ **Very Well** ☐ **Somewhat** ☐ **Hardly at all**

How long has the applicant been a member of your parish or religious order? _____

Share your perceptions of the applicant's faith life, participation in the sacraments, and prayer life.

Share your perceptions of (1) the applicant's understanding of who God is and (2) the applicant's views of Church teaching.

Please describe the applicant's level of involvement in the parish or religious community. Specify the activities and length of involvement. _____

How would you rate the applicant on the following traits? (Circle 1 answer for each category).

Honesty/Integrity	Above Average	Average	Below Average	Don't Know
Reliability	Above Average	Average	Below Average	Don't Know
Ability to Listen	Above Average	Average	Below Average	Don't Know
Human Relations Skills	Above Average	Average	Below Average	Don't Know
Intelligence	Above Average	Average	Below Average	Don't Know
Speaking Skills	Above Average	Average	Below Average	Don't Know
Moral Values	Above Average	Average	Below Average	Don't Know
Faithfulness to Practicing the Catholic Faith	Above Average	Average	Below Average	Don't Know
Confidentiality	Above Average	Average	Below Average	Don't Know
Ability to Handle Life Situations	Above Average	Average	Below Average	Don't Know

Please describe the applicant's psychological stability . _____

Why do you think the applicant desires to become a spiritual director? _____

Please comment on the applicant's ability to listen to another's story and ask questions. _____

To the best of your knowledge, does the applicant have any history of alcohol/drug abuse, spouse or child abuse, allegations of sexual misconduct involving minors, accusations of crime, indictments, arrests, convictions, or mental illness? (Check one) ☐ **Yes** ☐ **No** If yes, please describe.

What additional comments would you like to make about this candidate? _____

Considering all you know about the applicant’s personal character, family life, and motivation for becoming a spiritual director, what is your overall evaluation of the candidate?

☐	The applicant is a top-notch candidate.
☐	The applicant is a very good candidate.
☐	The applicant is an acceptable candidate.
☐	I have reservations about the applicant being a spiritual director. (On the lines below, explain why you have reservations.
☐	I would not recommend the applicant. Explain your reason(s) on the lines below).

Submitted on behalf of _____

Applicant's Name

Your Name _____

Street Address _____

City, State, Zip _____

Phone _____

Your Signature _____ Date _____

SUBMIT THIS REFERENCE FORM NO LATER THAN **MARCH 1, 2027** BY

U.S. MAIL TO:

Blanchette Catholic Center
Office of Catechetical Formation/SSD
16555 Weber Rd.
Crest Hill, IL 60403

OR EMAIL WITH A SCANNED COPY TO:

SSD@dioceseofjoliet.org

For questions and assistance, please call 815-221-6147.