



# PTS COLLEGE & ADVANCED STUDIES

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*Spirituality and Academic Excellence*

## CHARACTER REFERENCE

**To the Applicant:** Please complete this section before giving it to your  
 (1) TEACHER/PROFESSOR, (2) EMPLOYER/COLLEAGUE, (3) LEADER/MENTOR/FRIEND.

Name of Applicant	Email Address	Contact No.
Name of Recommender	Email Address	Contact No.
Program Applying For	Semester and Year of Entry	

**We would appreciate your unreserved evaluation of the above applicant. Please answer all sections.**

How long have you known the applicant? ___ years ___ months	How well do you know the applicant? <input type="checkbox"/> Casually <input type="checkbox"/> Familiar <input type="checkbox"/> Very Well
In what capacity have you known the applicant? Describe.	
Give your opinion of the applicant's character. Do you consider the applicant to be mature and stable? Describe.	

**Put YES in the box that describes the rate of which the personal quality is observed.**

Qualities	Not Observed	Rarely Observed	Sometimes Observed	Always Observed
Mentally sharp and intelligent				
Disciplined, focused, and self-controlled				
Decisive, organized, and consistent				
Self-motivated and self-initiated				
Efficient and thorough				
Punctual and time-conscious				
Influential and persuasive				
Patient and calm				
Diligent and persistent				
Healthy and physically fit				
Empathic and compassionate				
Gentle and kind				

Confident and enthusiastic				
Humble and teachable				
Cooperative and collaborative				
Creative, resourceful, and flexible				
Accountable and responsible				
Able to communicate clearly and articulately				
Flexible and willing to adjust				
What are the applicant's strengths and abilities?				
Does the applicant possess qualities and ability for leadership? In what ways is this demonstrated?				
Do you observe particular weaknesses that may hamper the applicant's goals? Describe.				
Are there any problems in the applicant's family that might affect his/her studies? Describe.				
How do you recommend the applicant? <input type="checkbox"/> Highly recommend <input type="checkbox"/> Recommend without question <input type="checkbox"/> Recommend with reservation				
If you have other unmentioned concerns, please state here.				

**All information supplied herein shall be kept confidential. Your prompt return of this questionnaire would be highly appreciated. Please email the accomplished form to registrar@ptscas.edu.ph.**

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Signature over printed name

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Date