



## Associate Missionaries of the Assumption Reference Form

APPLICANT: \_\_\_\_\_

**TO THE APPLICANT:** Please remember that you need two (2) references to complete your application with AMA. Consider signing this waiver so that we may gain information that is as objective as possible. If signed, your reference will forward their letter immediately to the AMA director.

APPLICANT'S SIGNATURE: \_\_\_\_\_

**TO THE REFERENCE:** The Associate Missionaries of the Assumption provides opportunities for lay men and women to serve the needs of the poor and marginalized for one year while living in community with other volunteers. The AMA will be living in close contact with the Religious of the Assumption or the Augustinians of the Assumption, women and men who have vowed to live a life dedicated to service to God, education and community living. The AMA could be serving at a domestic or an international site. We ask that you help us to know the applicant as we consider his/her acceptability to this lifestyle. Please give an honest opinion of the applicant and feel free to leave those questions blank that you do not feel capable of answering. Please return this form as soon as possible so that the application will be completed in a timely manner.

1. How long and under what circumstances have you known the applicant?
2. Describe the applicant's strengths.
3. In what areas do you feel the applicant has room for growth?
4. What types of situations cause the applicant stress? How does he/she respond under those circumstances?
5. Describe the applicant's ability to perform a task, particularly when working with others. What qualities help or hinder the applicant?
6. How does the applicant respond to directives from peers or supervisors? How does she/he respond when in disagreement with the directive?
7. What is the applicant's ability to get things done?
8. How has the applicant put into words his/her faith journey or relationship to God?



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9. Describe the applicant's ability to live in community (sharing tasks, faith sharing interacting with a group, resolving conflict). What qualities might help or hinder the applicant?

10. Do you think the applicant is well-suited to living and working closely with vowed religious?

11. Is there anything else you feel we should know about the applicant?

What is your overall recommendation of this applicant?

1. \_\_\_\_\_ Exceptional, rare find
2. \_\_\_\_\_ Excellent, no reservations at all
3. \_\_\_\_\_ Better than average
4. \_\_\_\_\_ Average
5. \_\_\_\_\_ Some reservations
6. \_\_\_\_\_ Weak, should be discouraged

Signature \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Please return completed form to:

**Michelle Sherman, Director**  
**Associate Missionaries of the Assumption**  
**16 Vineyard Street**  
**Worcester, MA 01603**

For questions, contact Michelle Sherman: [directorassumption@gmail.com](mailto:directorassumption@gmail.com), 508.767.1356