

Pastoral Recommendation

* Please return this form directly to the applicant in a sealed envelope or mail it to:
the**ROAR** P.O. Box 355 CROWN POINT, IN 46308

Your Name: _____

Church Name: _____

To be completed by the applicant:

Last Name: _____ First Name: _____

Address: _____

Phone: _____ E-mail _____

Address: _____

Phone: _____ Ministry Position: _____

Email: _____

1. How long have you know the applicant? _____
How well? Very well Fairly well Casually By name/sight

2. Please describe the applicant's level of involvement in your church.
(check all that apply)

- | | | |
|---|---------------------------------------|----------------------------------|
| <input type="radio"/> Attends regularly | <input type="radio"/> Cooperative | <input type="radio"/> Interested |
| <input type="radio"/> Attends irregularly | <input type="radio"/> Involved | <input type="radio"/> Distant |
| <input type="radio"/> Enthusiastic | <input type="radio"/> Willing to help | |

3. What are the strengths and spiritual gifts of the applicant according to your observations?

4. What is your assessment of the applicant's weakness? _____

5. What is the applicant's affect on his/her peers?

- Positive
- Neutral
- Negative
- Unknown

6. Please try to assess the following based on your knowledge of the applicant:

	Uncertain	Weak	Fair	Good	Very Good	Outstanding
Spiritual Maturity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Devotion to Christ.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Integrity and Honesty.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Openness to correction..	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Self-Discipline.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Willingness to serve.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Family Life.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ability to work with others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Communication skills.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Courtesy.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Leadership Skills.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reliability.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Physical Health.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Emotional Stability.....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments on any of the above: _____

7. Are there any complex family factors that you know of which might affect the applicant's studies? _____

8. I recommend this applicant for the **ROAR**.

- Highly Recommend
- Recommend
- Recommend with reservations*
- Do not Recommend*

*Please explain concerns below.

Signature _____ Date _____