

Charis Bible College

PASTOR'S RECOMMENDATION

Note: This section must be completed by applicant.

TO THE APPLICANT: This recommendation should be completed by your pastor and mailed directly to the Director. If your pastor is your parent, spouse, or other family member, ask another member of the church's pastoral staff to complete this form. If a person other than your pastor (assistant pastor, youth pastor or Bible study facilitator) completed the form, an explanation should be provided

Date _____ Phone _____

Applicant's Name _____

Present Address _____

City _____ County _____ Postcode _____

TO THE PASTOR: The above-named person is applying for admission to Charis Bible College. Serious consideration will be given to your comments. Thank you for your assistance. Once you have completed the form, **please mail it to: Director, Charis Bible College (Andrew Wommack Ministries, Europe), P.O. Box 4392, Walsall WS1 9AR.**

1. How long have you known the applicant? _____ (must be six months or longer)
In what capacity? _____

2. How well do you know the applicant?

- | | |
|---|---|
| <input type="checkbox"/> Very well - pastoral relationship | <input type="checkbox"/> Casually - few personal contacts |
| <input type="checkbox"/> Fairly well - numerous personal contacts | <input type="checkbox"/> By name/sight |

3. To your knowledge, has the applicant made a personal commitment to Jesus Christ?

- Yes
 No
 I don't know

4. To your knowledge, does the applicant:

Smoke? Yes / No
Drink alcohol? Yes / No
Use illegal drugs? Yes / No

Comments: _____

5. Which characteristic(s) best describes the applicant? Please check all that apply.

- | | |
|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> Critical | <input type="checkbox"/> Rebellious |
| <input type="checkbox"/> Enthusiastic | <input type="checkbox"/> Respectful |
| <input type="checkbox"/> Loving | <input type="checkbox"/> Sympathetic |
| <input type="checkbox"/> Passive | <input type="checkbox"/> Tolerant |

6. In what form of Christian service has the applicant participated regularly? _____

7. To what extent is the applicant engaged in the activities of your church? (Please check one.)

- | | |
|---|---|
| <input type="checkbox"/> Enthusiastic, deeply involved | <input type="checkbox"/> Seldom participates/attends regularly |
| <input type="checkbox"/> Cooperative, usually willing to help | <input type="checkbox"/> Attends irregularly, shows little interest |

8. Please indicate what you consider to be the applicant's strengths. _____

9. Please indicate what you consider to be the applicant's weaknesses. _____

10. The applicant's influence on his or her peers is:

- Positive
- Neutral
- Negative
- I don't know

11. Please describe home factors of which you are aware that might affect the applicant's success at CBC.

12. Please evaluate the applicant in regard to the following categories. (Please circle one.)

	Excellent	Above Average	Average	Below Average	Poor	No Chance To Observe
Christian commitment	1	2	3	4	5	6
Social adaptability	1	2	3	4	5	6
Cooperativeness	1	2	3	4	5	6
Integrity and honesty	1	2	3	4	5	6
Responsibility	1	2	3	4	5	6
Mental ability	1	2	3	4	5	6
Physical health	1	2	3	4	5	6
Initiative	1	2	3	4	5	6
Christian character	1	2	3	4	5	6
Emotional stability	1	2	3	4	5	6
Personal appearance	1	2	3	4	5	6
Leadership	1	2	3	4	5	6
Reliability	1	2	3	4	5	6

13. Please add any further comments you may have that would help in our evaluation. _____

Please Check One:

- I *highly* recommend
- I recommend
- I recommend *with* reservation
- I *cannot* recommend

Please print (or capital block letters) the information below:

Name _____ Phone (_____) _____

Church _____

Address _____

Signature _____ Date _____

Please return this form to: Charis Bible College (AWME), P.O. Box 4392, Walsall WS1 9AR.