

Pastoral Reference Form

AU Mentoring program developed by Women's LIFE Fellowship & Anderson University Women's Ministry

INSTRUCTIONS TO THE APPLICANT: Please complete the following before distributing the form.
Pick up form from the recommender and return to WLF.

NAME OF APPLICANT _____

BIRTH DATE _____

NOTE: The following references are NOT acceptable: • References from neighbors, friends, relatives, personal therapists, or employees who report directly to the applicant • Recommender should be pastor, assistant pastor, or some other leadership at the church. References from those who have known the applicant less than 1 year TO THE APPLICANT:

INSTRUCTIONS TO THE RECOMMENDER The applicant named above has applied for mentoring with Women's LIFE Fellowship and has requested that you provide a reference. We would be grateful if you would give your frank evaluation of the applicant by responding to the following questions.

TO BE COMPLETED BY THE RECOMMENDER

1. RELATIONSHIP TO THE APPLICANT

- a. How long have you known the applicant? ____ Years ____ Months
- b. How well do you know the applicant? ____ Casually ____ Well ____ Very Well
- c. Check the context(s) in which you know the applicant:
 - As a member/attender of my church where I am in leadership
 - As a colleague in ministry leadership
 - As an employee under my supervision

2. PLEASE CHECK THE FOLLOWING DESCRIPTIONS THAT APPLY TO THE CANDIDATE.

	← Below Average		Average	Above Average →		Unknown
Emotional Stability						
Personal Maturity						
Composure						
Cooperation						
Teamwork						
Responsibility						
Initiative						
Communication						
Spiritual Maturity						
Church Involvement						
Church Attendance						

3. RECOMMENDATION (Must be completed by the recommender) Please check one of the following:

- Recommend with enthusiasm
- Recommend for admission
- Recommend, but with reservation
- Do not recommend

Name of recommender (please print or type) _____

Position or job title _____

Name of church _____

Address City State Zip Country _____

Phone: Office/Home/Mobile (circle one) _____

E-mail _____

Signature/Date _____

Thank you again for your contribution. Please return to applicant for submission.