

Christian World College of Theology

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PASTORAL RECOMMENDATION FORM

Christian World College of Theology requires applicants to submit recommendations prior to consideration of acceptance. We ask that you complete this form carefully and return it directly to our admissions office. All information contained herein will be held in strict confidence.

1. Applicant's Last Name: _____ First Name: _____
2. How long have you known the applicant? _____.
3. How well do you know the applicant? _____.
4. To your knowledge has the applicant made a meaningful commitment to Jesus Christ? _____.
If so, how long has the applicant been a Christian? _____.
5. Please describe the applicant's attitude toward the church and its activities?
_____.
6. Does the applicant use illegal drugs, alcohol or tobacco? _____.
7. Is the applicant living a consistent Christian Life? _____ Comment: _____
_____.
8. Has the applicant given any evidence of a specific call to ministry? If so, please comment:

_____.
9. What ministry is the applicant currently involved in? _____.
10. Please list any specific abilities that you have observed in the applicant that would enhance his/her effectiveness in Christian ministry: _____.
11. Please, list any of the applicant's weaker points of which you feel we should be aware:

_____.

PLEASE MAKE ANY ADDITIONAL COMMENTS ON THE BACK OF THIS FORM.

Signature: _____ Date: _____

Name (please print): _____ Position: _____

Church: _____

Church City: _____ Day Phone :(____) ____ - _____