

1777 Route 332, FARMINGTON, NY 14425
 (585) 398-3627 VOICE
 (585) 398-3250 FAX

REFERENCE FORM

THE APPLICANT: Print your name and address on the lines below. Applicants should provide a stamped envelope addressed to Calvary Chapel School of Ministry for the person filling out the reference.

_____ Last name of applicant

_____ First

_____ Middle

The family Education Rights and Privacy Act of 1974 permits students the right to inspect their files. Because of the importance of preserving the confidentiality of a reference, the Act permits an applicant to waive his right of access to the reference. By signing below, the applicant willingly waives his right of access to see this recommendation knowing that this waiver is NOT required as a condition for admission.

TO THE PERSON WRITING THE REFERENCE: The above name applicant has applied for acceptance to Calvary Chapel School of Ministry and has named you as a reference. Based upon the information we receive from you, we can better make a decision concerning whether or not our school would best contribute to the applicant's current spiritual growth. Therefore, we would appreciate it if you would complete the following and mail it to us as soon as possible.

1. How long have you known the applicant? _____
2. In what capacity do you know the applicant? _____
3. How long has the applicant been an active Christian? _____
4. Describe the evidence you see in the applicant's life of his or her commitment to follow Christ: _____

5. What gifts or ministries do you feel God has given the applicant? _____

6. Please place an "X" at the appropriate place on each scale. Mark above the "?" if you feel your knowledge of the applicant is insufficient in that particular area.

		<i>LOW</i>		<i>AVERAGE</i>		<i>HIGH</i>		
Responsibility Ability to faithfully assume & carry out duties or obligations	<input type="checkbox"/> (?)	1 Not responsible	2	3 Somewhat responsible	4	5 Responsible	6	7 Very responsible
Adaptability Ability to adjust to changes in circumstances	<input type="checkbox"/> (?)	1 Much difficulty	2	3 Moderate ability to adapt	4	5 Adapts well	6	7 Very adaptable
Perseverance Ability to move ahead in the face of adversity	<input type="checkbox"/> (?)	1 Does not persevere	2	3 Sometimes perseveres	4	5 Sometimes perseveres	6	7 Almost always
Decisiveness Ability to synthesize information and choose a direction	<input type="checkbox"/> (?)	1 Very indecisive	2	3 Somewhat indecisive	4	5 Decisive	6	7 Very decisive

Personal Appearance 1 2 3 4 5 6 7
 And manner (?) Careless Fair Good Very well-groomed & well-mannered

Social Poise 1 2 3 4 5 6 7
 Social demeanor or confidence (?) Very lacking Limited confidence Confident Very poised & confident

Cooperation/Teamwork 1 2 3 4 5 6 7
 Ability to work with other people (?) Almost unable to work Some difficulty Works well Extremely effective

Communication 1 2 3 4 5 6 7
 Ability to present, evaluate and exchange thoughts with clarity & logic (?) Poor communicator Fair ability Good ability Outstanding ability

Spiritual Maturity 1 2 3 4 5 6 7
 Demonstrates maturity & consistency in Christian faith experience (?) Very immature Somewhat immature Very consistent Exceptional

Church Involvement 1 2 3 4 5 6 7
 Relationship with a local church carry out duties or obligations (?) Very infrequent Somewhat involved Active participation Deep involvement

Emotional Stability 1 2 3 4 5 6 7
 Response to stressful situations (?) Much difficulty Some difficulty Handles well Exceptionally well poised

Personal Ministry 1 2 3 4 5 6 7
 Active, positive influence on others for Christ on a personal basis (?) Does not conduct Limited ability Active Exceptional ability

Leadership (Demonstrated) 1 2 3 4 5 6 7
 Concrete evidence of ability to direct, conduct, guide or influence people (?) Almost never leads Leads on occasion Leads frequently Exceptional leadership

Leadership (Potential) 1 2 3 4 5 6 7
 He/she has abilities & skills necessary for development of quality leadership (?) Low potential Some potential Good potential Exceptional potential

7. Please include information which could be helpful in the consideration of this applicant. _____

8. Do you have any reservations about this applicant? If so, what are they? _____

Thank you for your cooperation in this matter. Please mail this reference to the address at the top of the form on the reverse side.

Signature: _____ Date: _____

Name (print): _____ Position/Title: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: () ()
 (home) (work)

Organization or church to which you belong: _____