

Confidential Reference

TYPE OR PRINT IN INK

RECOMMENDATION FORM: To be filled out by high school or college teacher, employer or friend, and mailed directly to Master's Commission. A family member should not fill out this form.

Applicant's Name _____

Present Address _____

City _____ State _____ Zip _____

INSTRUCTIONS: Each applicant for admission to Master's commission must submit recommendations. Serious consideration will be given to your comments; therefore we ask that you complete the form carefully and return it directly to Master's Commission office. Your comments will be held in confidence.

| | EXCELLENT | GOOD | FAIR | POOR | NO OBSERVATION |
|---|-----------|-------|-------|-------|----------------|
| 1. Mental ability | _____ | _____ | _____ | _____ | _____ |
| 2. Personal motivation | _____ | _____ | _____ | _____ | _____ |
| 3. Industry/achievement | _____ | _____ | _____ | _____ | _____ |
| 4. Maturity | _____ | _____ | _____ | _____ | _____ |
| 5. Disposition | _____ | _____ | _____ | _____ | _____ |
| 6. Appearance | _____ | _____ | _____ | _____ | _____ |
| 7. Personal devotions | _____ | _____ | _____ | _____ | _____ |
| 8. Church attendance/involvement | _____ | _____ | _____ | _____ | _____ |
| 9. Spiritual growth observed | _____ | _____ | _____ | _____ | _____ |
| 10. Self-image | _____ | _____ | _____ | _____ | _____ |
| 11. Emotional stability | _____ | _____ | _____ | _____ | _____ |
| 12. Coping with personal problems | _____ | _____ | _____ | _____ | _____ |
| 13. Response to pressure | _____ | _____ | _____ | _____ | _____ |
| 14. Reliability/faithfulness | _____ | _____ | _____ | _____ | _____ |
| 15. Financial responsibility | _____ | _____ | _____ | _____ | _____ |
| 16. Honesty | _____ | _____ | _____ | _____ | _____ |
| 17. Openness | _____ | _____ | _____ | _____ | _____ |
| 18. Moral standards | _____ | _____ | _____ | _____ | _____ |
| 19. Positive attitudes | _____ | _____ | _____ | _____ | _____ |
| 20. Grateful spirit | _____ | _____ | _____ | _____ | _____ |
| 21. Enthusiasm | _____ | _____ | _____ | _____ | _____ |
| 22. Judgment/common sense | _____ | _____ | _____ | _____ | _____ |
| 23. Creativity | _____ | _____ | _____ | _____ | _____ |
| 24. Adaptability/flexibility | _____ | _____ | _____ | _____ | _____ |
| 25. Teamwork/cooperation | _____ | _____ | _____ | _____ | _____ |
| 26. Servant hood | _____ | _____ | _____ | _____ | _____ |
| 27. Follows instructions | _____ | _____ | _____ | _____ | _____ |
| 28. Teachable Spirit | _____ | _____ | _____ | _____ | _____ |
| 29. Liked by others | _____ | _____ | _____ | _____ | _____ |
| 30. Concern for others | _____ | _____ | _____ | _____ | _____ |
| 31. Can express feelings | _____ | _____ | _____ | _____ | _____ |
| 32. Communication skills | _____ | _____ | _____ | _____ | _____ |
| 33. Ability to motivate, organize, train others | _____ | _____ | _____ | _____ | _____ |

| | | | | | |
|--------------------------------|-------|-------|-------|-------|-------|
| 34. Ability to plan/ set goals | _____ | _____ | _____ | _____ | _____ |
| 35. Self-discipline | _____ | _____ | _____ | _____ | _____ |
| 36. Physical condition, health | _____ | _____ | _____ | _____ | _____ |

In your opinion this applicant's Christian witness is which of the following?:

mature, contagious, genuine and growing, over-emotional,
 superficial, other: _____

What character strengths or weakness would you like to comment on?

Does this applicant have any persistent habits that you feel would restrict him/her from fitting into a fairly intensive program? _____

Would you recommend this applicant for acceptance to the Master's Commission program?

Yes No Hesitant, Why? _____

Name _____

Address _____

City _____ State _____ Zip _____

Phone (_____) _____

Name of Church and Denomination _____

Position in church (if any) _____

Relationship to the applicant is:

High School Teacher College Teacher Employer Friend Other _____

You have known the applicant for _____ years and consider your relationship to be:
 very close, fairly close, and acquaintance, minimal.

Any additional comments can be made on a separate sheet.

Signature: _____ Date: _____

Please send this form directly to the Master's Commission Office.