



LEADERSHIP RECOMMENDATION: Please fill this page out, sign, date, and give this form to your leadership reference

APPLICANT INFORMATION

Name		Home Phone ()
Street Address		City/State/Zip
Date of Birth (MM/DD/YYYY)	E-mail Address	

Please read before distributing form. This form should be completed by your Ministry Leader (i.e. Pastor, Associate Pastor, Department Head or Small Group Leader) and returned by him/her directly to VFC of Kalamazoo. **An immediate family member of the applicant should not fill out this form.** If your Ministry Leader is an immediate family member, please give this form to an Associate Pastor or Ministry Leader in your church.

Applicant Signature _____ **Date** _____

TO THE MINISTRY LEADER (I.E. PASTOR, ASSOCIATE PASTOR, DEPARTMENT HEAD OR SMALL GROUP LEADER):

Each applicant for admission to the EPIC School of Ministry must submit a leadership recommendation. Serious consideration will be given to your comments; therefore, we ask that you complete the form carefully.

Return all pages of this form directly to:
 Valley Family Church of Kalamazoo
 Attn: EPIC School of Ministry
 2500 Vincent
 Portage, MI 49024

Since we request a candid evaluation, we hold your comments in strictest confidence.
Thank you for your time and assistance.

If more space is required to elaborate, please attach additional information to this form.

How long have you known applicant?

_____ Years _____ Months

What is your relationship with applicant?

How well do you know him / her?

- By Name - Sight
- Casually - Very Few Contacts
- Fairly Well - Numerous Personal Contacts
- Very Close Pastoral Relationship

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

- Yes
- No
- Not Sure

If "No" or "Not Sure", please comment:

Please select the applicant's level of involvement in church activities.

- Attends Irregularly; Shows Little Interest
- Seldom Participates; But Attends Regularly
- Cooperative; Usually Willing to Help
- Enthusiastic; Deeply Involved

Have you recognized a "calling to ministry" in the applicant's life?

- Yes
- No
- Unknown

How do they respond to those in authority?

What do you consider the applicant's strong points? (Include positive personal traits)

What do you consider the applicant's weak points? (Include negative personal traits)

To your knowledge, has the applicant ever been accused, questioned, or investigated for child abuse, child neglect, or child molestation? If yes, please explain.

Please check the terms that best describe the student's attitude toward church and its activities (Check all that apply)

<input type="checkbox"/> Warmhearted	<input type="checkbox"/> Diligent	<input type="checkbox"/> Sympathetic	<input type="checkbox"/> Overbearing	<input type="checkbox"/> Trustworthy
<input type="checkbox"/> Enthusiastic	<input type="checkbox"/> Reliable	<input type="checkbox"/> Tolerant	<input type="checkbox"/> Passive	<input type="checkbox"/> Faithful
<input type="checkbox"/> Loving	<input type="checkbox"/> Arrogant	<input type="checkbox"/> Passionate	<input type="checkbox"/> Patient	<input type="checkbox"/> Critical

Does the applicant have personality traits which impair his/her relationship with others? Yes No

Comments:

Please check one box next to each topic	Excellent	Good	Needs Improvement	Poor	No Opportunity to Observe
Self-Discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Acceptance by Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teaching Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Influence on Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Christian Commitment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooperativeness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal Appearance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Moral Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Adaptability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrity & Honesty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional Stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please share with us any additional information you may have about the applicant that would help in our evaluation. This information could cover recent experiences or incidents in the applicant's marriage and family life, or even general personality appraisal.

Name / Signature	Church
Phone ()	Date

Return to:
 Valley Family Church of Kalamazoo. Attn: EPIC School of Ministry 2500 Vincent Ave, Kalamazoo, MI 49024
 (269) 324-5599

