

Pastor's Reference Form

SECTION ONE - TO BE COMPLETED BY THE APPLICANT

Full Name _____

Last

First

Middle

Address _____

City _____ State _____ Zip Code _____ E-mail _____

Seeking admission for: summer fall spring Year _____

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

Signature _____ Date _____

SECTION TWO - TO BE COMPLETED BY THE APPLICANT'S PASTOR

The person named above has applied for admission to the Graduate Program in Educational Leadership at Clearwater Christian College. Your name has been given as an individual who knows the applicant well. We appreciate you answering the questions on this form with utmost frankness. This information will be used in helping us decide whether or not the applicant will satisfactorily fit into our educational program.

1. What is your relationship to the applicant?
2. How long have you known the applicant?
3. How well do you know the applicant? Slightly Casually Well Very Well
4. How would you characterize the applicant's Christian experience? Please include his/her conversion, growth, and consecration.
5. What experiences and success has the applicant had in Christian Service?

6. Evaluate the applicant by checking the appropriate rating for the criteria given.

Criteria	Excellent	Good	Average	BelowAverage	No Knowledge
<i>Evidence of financial responsibility</i>					
<i>Moral purity</i>					
<i>Emotional stability</i>					
<i>Response to authority</i>					
<i>Leadership qualities and potential</i>					
<i>Faithfulness to church and ministry</i>					

Additional Comments (information that would help the graduate admissions committee)

RECOMMENDATION:

- Highly recommend Recommend Recommend with reservation
 Prefer not to recommend I need to discuss this recommendation by telephone

Print Name _____ Position _____

Signature _____ Date _____

Address _____ Phone (_____) _____

Clearwater Christian College Graduate School admits students without regard to race, color, physical handicap, and national or ethnic origin.