

PASTORAL RECOMMENDATION

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CLEARWATER CHRISTIAN COLLEGE
 RECOMMENDATION

SECTION ONE To Be Completed by the Applicant

Complete Section 1, and give this form to your pastor, youth pastor, or lay leader in your church to complete Section 2. Reference should not be related to the applicant.

Name _____ City _____ State _____

I, the undersigned, voluntarily waive any right to inspect the contents of this recommendation.

Signature _____ Date _____

SECTION TWO To Be Completed by the Pastoral Reference

Please provide responses to the questions given below. Completed forms may be mailed or faxed to the Office of Enrollment Services.

1. What is your relationship to the applicant? _____
2. Is the applicant a member of your church? Yes No
3. The applicant's church attendance can best be described as _____.
4. To the best of your knowledge, is there clear evidence of the applicant's testimony of a personal relationship with Jesus Christ through salvation? Yes No Uncertain
5. Which term best characterizes the applicant's Christian character? Exemplary
 Steady, consistent Rather consistent Weak, inconsistent No evidence
6. Are you aware of the applicant's use of tobacco, alcoholic beverages, or illicit drugs, or does the applicant have any inappropriate sexual relationships? If yes, explain below. Yes No

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

Criteria	Excellent	Good	Average	Below Average	No Evaluation
Attitude toward authority					
Cooperation					
Emotional stability					
Integrity					
Leadership					
Peer acceptance					
Reputation					
Self-discipline					
Response to counsel					
Social maturity					

8. Please provide any additional comments valuable to us on the back of this form.

9. RECOMMENDATION: Highly recommend Recommend Recommend with reservation
 Prefer not to recommend I need to discuss this recommendation by telephone.

Name (please print) _____ Church Name _____

Address _____ City _____ State _____ Zip _____

Phone (____) _____ Signature _____ Date _____