

RECOMMENDATION FORM

Name of Applicant

(Last) _____ (First) _____

The person named above is applying for the Leadership Development Program at Cascade Gospel Chapel. The program is church-related and supportive of parental authority in student's lives. We request your cooperation in completing this form to the best of your ability, and submit it directly to **Cascade Gospel Chapel, Attention: Alex Perello** alex@cascadegospelchapel.com.

The Cascade Ministry Trainee is committed Christians to become effective leaders and ministers in the local church and in their community. The applicant cannot be considered until all references have been received.

Your comments will be held in confidence. Thank you.

SECTION 1: PASTORAL / LEADER INFORMATION

(First) _____ (Last) _____

Home Phone _____ Cell Phone _____

E-Mail _____

City _____ Province _____

Postal Code _____

Church Name: _____

Church Street Address: _____

Position: _____

If not a Senior Pastor/Minister, but I am authorized by the Senior Pastor to complete this form of recommendation.

I am over 18 years old.

SECTION 2: PLEASE ANSWER THE FOLLOWING

How long have you known the applicant? _____ Years _____ Months

In what capacity do you know the applicant? _____

How well do you know the applicant?

Very well

Well

Casually

Does the applicant know Christ as his/her personal Saviour and Lord?

Yes

No

Does the applicant demonstrate Christ in his/her lifestyle?

Yes

No

Please provide any additional comments:

In your association with the applicant, what has been the level of commitment you have seen them exemplify?

Faithful

Inconsistent

Other

Describe the applicant's leadership ability:

Prefers to follow

Makes some effort to lead

Good ability

Exceptional ability

What are the applicant's strong points (include special abilities)?

Has the applicant discussed or counselled with you concerning his / her interest in participating in the CA Church Pastoral Apprenticeship Program. Yes No

What do you understand is the real motive for the applicant wanting to participate in the CA Church Pastoral Apprenticeship Program?

Understanding that it is our desire that there be no conflict with parental and church authority, would you be supportive of these guidelines and standards? Yes No

SECTION 3: PLEASE RATE THE APPLICANT IN THE FOLLOWING AREAS:

On a scale of 0 to 4 (0 = low, 4 = high), rate the applicant in the following areas:

0 = Unknown 1 = Deficient 2 = Average 3 = Moderate 4 = Superior

Personal Discipline _____ Making New Friends _____ Leadership Abilities _____

Lifestyle Example _____ Response to Correction _____ Financial Discipline _____

Emotional Stability _____ Initiative _____ Consistence / Faithfulness _____

Listening _____ Positive Speech _____ Obedience _____

Punctuality _____ Judgement _____ Spiritual Maturity _____

Finishing Projects _____ Submission to Authority _____ Self-Confidence _____

Compassion _____ Maintaining Friendships _____ Excellence in Homework _____

Additional comments:

SECTION 4: PASTORAL / LEADER APPROVAL

Do you fully approve of the applicant participating in this program? Yes No

Please comment in detail including any reservations or concerns:

Name _____

Signature _____

Date _____