



# LIVING WORD SCHOOL OF MINISTRY PERSONAL RECOMMENDATION FORM

7600 West Roosevelt Road Forest Park, IL 60130-1706

**EARLY REGISTRATION BY JUNE 30, 2010**

**FINAL DATE FOR PROCESSING: AUGUST 1, 2010**

Title:  Mr.  Mrs.  Miss  Dr.  Rev.  \_\_\_\_\_

NAME \_\_\_\_\_ E-MAIL \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ PRIMARY PHONE \_\_\_\_\_ SECONDARY PHONE \_\_\_\_\_

**Please read before distributing.** This form should be completed by the person completing your Personal Recommendation and should be returned directly to Living Word School of Ministry.  
I agree that this confidential statement is being submitted with the understanding that its contents will not be shared with me. I hereby waive my right to see the confidential statement submitted on this form.  
\_\_\_\_\_  
*Applicant's Signature*

**To the Personal Reference:**  
Each applicant of the School of Ministry must submit a personal recommendation. Serious consideration will be given to your comments; therefore, we ask that you complete the form carefully. Please return this form directly to Living Word School of Ministry, Attention: Admissions, 7600 W. Roosevelt Rd., Forest Park, IL 60130. Since we request a candid evaluation, we will hold your comments in strictest confidence. Thank you for your time and assistance.

### The following information is to be completed by the Applicant's Personal Reference

NAME \_\_\_\_\_ NAME OF CHURCH \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ PRIMARY PHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

AGE:  18-25  26-35  36-50  51 & over

How long have you known the applicant? \_\_\_\_\_

How well do you know him/her? (Check one)

- Very close personal relationship  Fairly well (numerous personal contacts)  Casually (few personal contacts)  By name/sight

To your knowledge has the applicant made a meaningful personal commitment to Jesus Christ?  Yes  No  Unknown

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How industrious is he/she as a student or worker?

- Usually conscientious, hard worker  Works harder than most students/workers  Does about as much work as most others  
 Works less than most others  Very lazy  Have no basis for judgement

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is the applicant prompt in paying his/her bills?  Yes  No  Unknown

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Emotional Evaluation:  Very Stable  Stable  Unstable  Very unstable

**Please evaluate his/her personal character.**

	EXCELLENT	GOOD	FAIR	POOR	UNKNOWN
Honesty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Financial responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dependability	<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"/>
Academic ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to lead others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal cleanliness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consideration for others	<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"/>
Acceptance of instruction and/or discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Submission and response to authority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**From personal knowledge of the applicant, as a potential candidate for ministerial training, would you?**

- Highly recommend him/her                       Recommend him/her  
 Recommend him/her with slight reservations\*                       Hesitate in recommending him/her\*  
 Be unable to honestly recommend him/her\*

(\*Please explain) \_\_\_\_\_

The applicant's spiritual influence on others is:     Positive     Neutral     Negative

With what sort of companions does he/she usually associate? \_\_\_\_\_

**To your knowledge, is the applicant involved in:**

- tobacco usage     drinking alcoholic beverages     illegal drugs usage     sexual immorality

(If you checked any, please explain) \_\_\_\_\_

Please describe the applicant's home life and/or marriage. \_\_\_\_\_

Have you noted physical weaknesses or emotional problems that would hinder him/her in an intense academic environment?

What do you consider the applicant's strong points? \_\_\_\_\_

What do you consider the applicant's weak points? \_\_\_\_\_

**Please share with us any 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 life, or even a general personality appraisal.)*

To your knowledge, has the applicant ever been accused, questioned, or investigated for child abuse/neglect/molestation?

(If yes, please explain) \_\_\_\_\_

To your knowledge, has the applicant ever been accused, questioned, or investigated for spousal abuse?

(If yes, please explain) \_\_\_\_\_

Personal Reference's Signature

Date