

Covenant Global Evangelism

Family Recommendation

Name of Applicant _____

The above named person is applying for Affiliation with Covenant Global Evangelism of Eaton, Ohio. The questions listed below should be answered honestly and correctly, for serious consideration will be given to your answers. Our files are kept confidential, so please fill out this form to the best of your ability and return it to our office in the envelope provided. Thank you.

1. How long have you known the above person? _____ years
2. Has your relationship been: Intensive _____ Very Close _____ Close _____ Casual _____ Intermittent _____
Distant _____ Other _____
3. What has been the nature of your acquaintance?
Church: Pastor _____ Sunday School Teacher _____ Choir Director _____ Co-worker _____ Fellowship _____
Other _____
Social: Friend of the Family _____ Personal Friend _____ Neighbor _____
Other _____
4. To your knowledge, does this individual have a definite call to the ministry? ____ Yes ____ No ____ Do not know
Comments: _____

5. To your knowledge, is the applicant currently involved in active ministry? ____ Yes ____ No ____ Do not know
6. Pulpit Experience/Preaching and Teaching: Well Experienced _____ Light Experience _____ No Experience _____
Do not know _____
7. Ability to work in the ministry Very industrious, does more than required _____ Satisfactory work ability _____
Enough to get by _____ Does not meet minimum standards _____ Do not know _____
8. Stability/Ability to withstand pressure: Tolerates pressure well _____ Average tolerance/usually remains calm _____
Easily irritated _____ Cannot handle pressure _____ Do not know _____
9. Personal Organization Conscientious, tidy and clean _____ Fairly neat _____ Tends to be disorderly _____
Disorderly and untidy _____ Do not know _____

10. Response / Attitude toward Authority Helpful and cooperative _____ Usually responsive _____ Resentful of authority _____ Not cooperative/very resentful _____ Do not know
11. Emotional Stability Self-controlled and mature _____ Usually stable _____ Moody and changeable _____ Many uncontrolled periods/unstable _____ Do not know
12. From your knowledge of applicant's general character, past record, and present behavior, check any of the following which apply: Uses tobacco _____ Gambles _____ Drinks alcoholic beverages _____ Has been involved in serious community disturbances _____ Has been arrested for other than minor traffic violations _____ Has a reputation for involvement in behavior indicating serious moral weakness _____
13. Having observed this person in the ministry, would you: Highly recommend _____ Recommend _____ Recommend with reservations _____ Please list any reservations _____

- Not recommend _____ I do not know enough about his/her ministry to make a valid recommendation _____

14. Please give us your personal comments on the integrity of the applicant to aid us in our decision making

Name _____ Signature _____

Address _____

City _____ State _____ Zip _____

Phone _____ Age 18-25 ___ 26-35 ___ 36-50 ___ 51 & over ___

Ministry Name _____

Your Position _____