



LIFEWAY BAPTIST UNIVERSITY

Church Recommendation

TO THE APPLICANT

Please complete this section before giving it to your church pastor.

Application for the year _____ ___ Spring ___ Summer ___ Fall

Full name _____
Last First Middle Maiden (if applicable)

Current Mailing Address _____
Street Number

City State Zip _____ Citizenship _____
Country

Email Address _____

Telephone _____

TO THE PASTOR

The student named above is applying for admissions to _____. We are committed to training God-called and church-selected men and women for Christian ministry. Your recommendation is valuable in evaluating the qualifications of this candidate. After completing the form, mail it directly to: THE REGISTRAR,

Please complete the following sections.

Part A About the Applicant

1. How long have you known the applicant? _____ Years _____ Months
2. How well do you know the applicant? _____ Casually _____ Well _____ Very Well
3. How long has the applicant been a member of your church? _____ Years _____ Months
 - a. How did the applicant gain membership?

_____ By baptism	Date baptized	_____
_____ By transfer	Date transferred	_____
_____ By profession of faith		
4. Describe the applicant's involvement in the local church. Please be detailed [for example, leadership positions and year(s) held]. Please use a separate sheet if the space below is not enough.



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Part B Ability of the Applicant

- Which of these spiritual gifts/talents has the candidate demonstrated within the church?
 Preaching Administration Music
 Teaching Counseling Others _____
- In regards to potential in Christian ministry, how do you rate the applicant?
 Excellent Very Good Good Poor
- Is the applicant the type whom you would be willing to call as pastor or worker of your church once seminary training is completed?
 Yes No Maybe
- Using the scale of 1 to 50, with 5 as the highest, please rate the applicant in the following areas.

<p>A. Achievement _____ Does the applicant display the ability to formulate, execute, and carry out plans to completion?</p> <p>B. Emotional Adjustment _____ Does the applicant maintain a balanced and self-controlled life?</p> <p>C. Intelligence _____ Does the applicant possess high mental capacity?</p> <p>D. Leadership _____ Does the applicant display the ability to influence and inspire others?</p> <p>E. Perseverance _____ How does the applicant handle difficulties in a give task?</p> <p>F. Physical Condition _____ Is the applicant healthy and able to cope with seminary studies?</p>	<p>G. Sensitivity _____ How well does the applicant display sensitivity to how others feel?</p> <p>H. Self-image _____ How well does the applicant see him/her self?</p> <p>I. Sociability/Friendliness _____ Does the applicant show capability of identifying with different groups of people?</p> <p>J. Teachability _____ How well does the applicant respond to teaching moments?</p> <p>K. Teamwork _____ Does the applicant show an ability to work with others well?</p>
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Part C Aiding the Applicant

- How will the applicant meet his/her financial needs?
 Help from the family Help from the church
 Help from friends Personal savings
 Others _____
- If the church decides to help the applicant, please indicate the amount and the frequency.
 \$ _____
 Annual Quarterly Semi-annual Monthly
- The financial help will be sent:
 Through the school Directly to the student



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UNIVERSITY

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CHURCH ACTION

Approved for recommendation by the church during its regular/special business meeting held on

_____.

Approved by (Please check if you are not the pastor):

___ Elder

___ Chairman of the Board

___ Chairman of the Deacons

___ Other _____

Your name (please print/write in block letters) _____

Your address (please print) _____

Your signature _____ Date signed _____

Church secretary (Full name and signature) _____

Date signed _____