

Pastor^{*} Reference

Cole Short Term Mission

To be completed by the Applicant

I understand 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 statements submitted on this form.

Applicant Signature: _____ Date: ___/___/___

Applicant name (*please print*): _____

Cole Short Term Mission Project Name: _____

To be completed by Reference

This form will remain CONFIDENTIAL. Rate the Applicant by checking one item under each heading below that best describes the Applicant. Additional comments can be made in the Summary Paragraph.

How long and in what capacity have you known Applicant: _____

ACHIEVEMENT

- Starts but does not finish
- Does only what is assigned
- Meets average expectations
- Resourceful and effective

LEADERSHIP

- Makes no effort to lead
- Tries but lacks ability
- Good leadership ability
- Excellent ability to lead

PHYSICAL CONDITION

- Frequently incapacitated
- Somewhat below par
- Good health
- Rugged and vigorous

LIMITATIONS

Check any characteristics or traits below, which you have noted in the Applicant

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> Often sullen | <input type="checkbox"/> Intolerant | <input type="checkbox"/> Domineering | <input type="checkbox"/> Critical of others |
| <input type="checkbox"/> Argumentative | <input type="checkbox"/> Inflexible | <input type="checkbox"/> Depressed | <input type="checkbox"/> Frequently worried |
| <input type="checkbox"/> Impatient | <input type="checkbox"/> Irritated | <input type="checkbox"/> Anxious | |
| <input type="checkbox"/> Discouraged | <input type="checkbox"/> Easily offended | <input type="checkbox"/> Easily embarrassed | |
| <input type="checkbox"/> Given to exclusive and absorbing friendships | | <input type="checkbox"/> Prejudiced toward races or nationalities | |
| <input type="checkbox"/> Lacking in humor or ability to take a joke | | | |

Please comment on any check above:

(Continued on back)

*If there is not a pastor who knows you well, you may ask a Ministry Leader (Bible Study or Growth Group) to complete this form.

Please circle the appropriate answer for the following questions:

Does the Applicant possess knowledge of the Bible? Yes No I don't know

Does the Applicant practice daily prayer? Yes No I don't know

Does the Applicant have a genuine concern for people
leading to earnest efforts to win their salvation? Yes No I don't know

Does the Applicant show appropriate behavior toward
the opposite gender? Yes No I don't know

If the Applicant is married, please describe the quality of the martial relationship. Do they communicate well?
Respect, support and affirm each other?

Would you recommend the Applicant be accepted for this project? ___ Yes ___ No

Summary Paragraph

Please state frankly your opinion of the Applicant's all-around fitness for Christian service. Add significant information and impressions that we should know which may not have been brought out by the preceding questions:

Reference Signature

Reference signature: _____ Date: ___/___/___

Reference name (please print): _____ Occupation: _____

Reference daytime phone: _____

Reference email address: _____

**Please mail completed form to Cole STM, c/o Janet Schaufelberger
7748 W. Bayhill St., Boise, ID 83704 (376-2083)**

Thank you for your investment of time in this application process!