LEVEL 1

PERSONAL REFERRAL

To be completed by a friend of the applicant but not a relative

Instructions:

To the Applicant:

Be sure to print/type your name in the ‘Name of Applicant’ line below. You should also provide your referee with an addressed and postage paid envelope.

To the Referee:

This evaluation is for the applicant named below who is applying for admission to Coventry Bible College. Serious consideration will be given to your comments. Please complete this form carefully. Since we request a candid evaluation, we will hold your comments in strictest confidence. Therefore, we ask that this completed form be placed in the envelope provided by the applicant, sealed and posted directly to Coventry Bible College.

Name of Applicant:

__________________________________________________________

(Title)          (First)          (Middle)          (Surname)

1. How long have you known the applicant?

__________________________________________________________________________________________________

2. Describe your relationship: □Very close  □Close  □Casual  □Distant

3. Describe the nature of your relationship: __________________________________________________________
   _____________________________________________________________________________________________
   _____________________________________________________________________________________________

4. Please evaluate his/her character by marking one of the following boxes:

   □ Excellent  □ Good  □ Fair  □ Poor  □ Unknown
5. **How industrious is he/she as a student/worker? (Please mark the ONE that is most appropriate.)**

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

**Please Comment:**

6. **Describe the applicant’s attitude toward you, your church and church activities.**

_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

7. **From personal knowledge of the individual, would you? (Please mark the ONE that is most appropriate.)**

___ Highly recommend him/her as a candidate for ministerial training.
___ Recommend him/her as a candidate for ministerial training.
___ Recommend him/her with slight reservations.
___ Hesitate in recommending him/her for ministerial training.
___ Unable to honestly recommend him/her as a candidate for ministerial training

**If you marked any of the last three, please explain below.**
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

8. **Emotional Evaluation:** ___ Very Stable ___ Stable ___ Unstable ___ Very Unstable
9. Does the applicant respond well to authority?  
   Y  N

10. The applicant’s spiritual influence on others?  
    _ Positive _ Neutral  _ Negative

11. Does the applicant associate with people of moral character?  
    Y  N

12. Does the applicant have a good home life and/or marriage?  
    Y  N

Please give short answers to the following questions:

13. What do you consider to be the applicant’s strong points?
    ___________________________________________________________________
    ___________________________________________________________________
    ___________________________________________________________________

14. What do you consider the applicant’s weak points?
    ___________________________________________________________________
    ___________________________________________________________________
    ___________________________________________________________________
    ___________________________________________________________________

15. Is there any other information about the applicant that would help our evaluation?
    ___________________________________________________________________
    ___________________________________________________________________
    ___________________________________________________________________
    ___________________________________________________________________

Please print your name and contact details:
Name: ___________________________________________________________________
Address: ___________________________________________________________________
Tel.  Fax:  Email: ___________________________________________________________________

Thank you for your time and participation.

If you have any questions, please email us at info@coventrybiblecollege.co.uk or call us on 024 7767 8523

Please post to:  Coventry Bible College
                15 Primrose Drive
                Bedworth
                Warwickshire  CV12 0GL