

FRIEND'S REFERENCE FORM

_____ has made application for ministerial credentials with the Pentecostal Church of God. We were referred to you as one acquainted with the applicant and competent to express a trustworthy opinion regarding the applicant's qualifications to fill the sacred trust of a minister of the Gospel. We value your judgement and appreciate your cooperation. Thank you for taking the time to complete this form as fully as possible and returning it in the enclosed envelope. Your reply will be regarded as confidential. Please return by: **ASAP.**

1. How long have you known the applicant? _____
2. In what social context did you meet? _____
3. In what capacity do you view your relationship with the applicant?
 Acquaintance Casual Friend Close Friend
4. Have you ever been entertained in the home of the applicant? _____
Have you ever entertained the applicant in your home? _____
5. How often have you been with the applicant socially?
 Seldom Occasionally Frequently
6. Please check all the words below which you believe accurately describe the applicant:
 Timid Gentle Impatient Modest Impulsive
 Nervous Loving Tactful Intelligent Socially Awkward
 Mature Sarcastic Patient Insecure Compassionate
 Deliberate Congenial Stubborn Studious Verbal
 Kind Selfish Secure Considerate Relaxed
 Abrasive Trustworthy Motivated Organized Angry
7. How would you describe the applicant's marriage?
 Not Married
 Very Well-Adjusted Strained
 Well-Adjusted Very Strained
 Adjusted Don't know
8. How would you describe the applicant's children?
 No Children
 Very Well-Behaved Poorly Behaved

___ Well-Behaved

___ Very Poorly Behaved

___ Average

___ Don't Know

9. How well do you judge the applicant's ability to keep confidence?

___ Very Good

___ Poor

___ Good

___ Very Poor

___ Average

___ Don't Know

10. Further comments: _____

Name: _____		
Address: _____		
City _____	State _____	Zip _____
Phone _____	Email _____	
Signature of reference _____		

Your prompt response will be very much appreciated, and will be regarded as confidential information.

Please return form to the District Office: _____

Address: _____