Pillar of Fire Churches International Incorporated

CONFIDENTIAL REFERENCE

(Senior Pastor or Church Official) (Must be a non-family member)

	Name of Applicant Applicants Signature
	Address:
	Applying for: Ordination License Certified Christian Worker Certified Missionary Worker
	Please complete the following evaluation to the best of your knowledge. Under our privacy policy the
	information that you provide will be held in strict confidence. Please sign & mail the completed form to:
	Pillar of Fire Churches International
	C/O Rev Helen Head
	30 Appalachian Cr.
	Kitchener ON N2E 1A4
1.	Length of time you have known the applicant?Years
	How well do you know the applicant? Very Well Fairly Well Casually
2.	What association have you had with the applicant?
3.	Do you feel that you know the applicant well enough to evaluate his/her eligibility for credentials?
4.	How does the applicant interact or work with others?
5.	How well does the applicant respond to authority?
6.	Please give what information you can regarding the applicant's family life.
7	Please give what information you can regarding the applicant's church, social and business life.
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8.	Comment on any spiritual gifts or ministerial abilities that the applicant has.
9.	In your opinion does the applicant have a call to Christian ministry?
10	. In your opinion what are the applicant's weak points & strengths?
10.	. In your opinion what are the applicant's weak points a strengths.
11.	. Comment on any areas you think the applicant may benefit from further training.
12.	. Explain briefly any concerns regarding the applicant's moral life.
1.3	. Would you be confident in recommending the applicant for credentials with Pillar of Fire Churches
10.	International?
	If not please explain.

13. To aid us in our decision making, please give us your personal comments on the integrity of the applicant.		
14. To your knowledge is the applicant currently involved in ministry? In what ministerial position(s) with the local church is the applicant presently serving?		
15. To the best of your knowledge please check off the areas in each of the categories that best describes the applicant.		
Personal Interaction with others: Please describe briefly in one or two words		
Emotional responses: Too emotional Excitable Apathetic Usually well-balanced Unresponsive Consistently well-balanced Of unusual emotional stability No not know		
Influence: Detrimental influence Passive, no positive influence Varying influence Consistently good influence Unusually wholesome influence Do not know		
Initiative: Requires constant oversight Succeeds if always directed Shows good initiative Average occasional initiative Actively creative Do not know		
Industry: Needs constant prodding Needs occasional prodding Performs assigned tasks Exceeds what is required Seeks additional work No not know		
Leadership Skills/Qualities: Always a follower Tries, but usually fails at leadership Assumes occasional leadership Good Leadership Inspiring and successful leadership Do not know		
Puposefulness: Aimless trifler Vacillating in purpose Average potential Self-directed Strives to realize well-formed purpose Do not know		
Responsibility/Reliability: Irresponsible Shows some responsibility Usually reliable Conscientiously responsibility Do not know		
Spiritual Growth: No interest in spiritual growth Little evidence of spiritual growth Average spirituality Shows growth and Christian lifestyle Do not know		
17. Any further remarks concerning the applicant's spirituality, cooperativeness, tactfulness, good judgment, ethics, and integrity will be appreciated. (Please use another sheet of paper.)		
Name (please print)		
Address		
Position Church Phone Home		
Email AddressWeb-site		
Signature Date		
Thank You!		