

Promise Christian University

P.O. Box 3003, Covina, CA 91722 (626) 296-7502/Fax (626) 296-7502 E-Mail: promisecu@aol.com

MINISTER'S RECOMMENDATION

To the student applicant: Please complete and sign.

Confidential Mr. Mrs. Miss

Name of Applicant: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____

CONCENTRATION OF STUDY:

- Bachelor in Theology Master in Theology Doctorate in Theology
 Ministerial Studies Doctor of Divinity

This form should be completed by your pastor and returned directly to Admissions, Promise Christian University, College and Seminary. If a minister other than your pastor completes this form, please include an explanation.

Signature: _____

TO THE MINISTER

PRINT OR TYPE

1. How long have you known the applicant? _____

2. How well do you know him/her?

- By name/sight Fairly well - numerous personal contacts
 Casually Very close personal relationship

3. To your knowledge, has the applicant made a meaningful personal commitment to Jesus Christ? Yes No

I don't know **Comments:** _____

4. Please indicate applicant's level of involvement in church activities. (Check one)

- Attends Church regularly and deeply involved
 Attends Church regularly but not involved
 Attends Church irregularly because of work related or other commitments
 Attends Church irregularly, shows little interest

MINISTERIAL RECOMMENDATION

How do you rate this person?

Trait	Excellent	Above Average	Average	Below Average	Don't know
Reliability , Faithfulness, responsibility					
Maturity , ability to cope with life's situations					
Christian Commitment					
Judgment					
Leadership , competence					
Personal Appearance					
Integrity , honesty, moral character					
Supportive of Church Leadership					
A genuine call of God upon his/her life					
Paying tithes and giving offerings					
Operates in the gifts of the Spirit					
Interpersonal and public relations					

Please share with us what you consider the applicant's strong and weak points are as well as any other information you may have about the applicant that would help in our evaluation.

To your knowledge, does the applicant smoke? drink? Use illegal drugs? Or other negative habits and/or traits? " No " Yes, please explain:

On the basis of the above, the applicant is:

" strongly recommended " recommended " recommended with some reservations " Not recommended

Personal Comments:

Minister's

Name: _____

Name of church and
denomination: _____

Address, City, State,
Zip: _____

Phone: _____

Email: _____

revised 9/9/00

Please complete and return to:
Promise Christian University, P.O. Box 3003, Covina, CA 91722