



THIS SECTION TO BE COMPLETED BY THE APPLICANT

Name _____
Last First Middle

SSN _____

Home Address _____

City _____ State _____ Zip _____ Country _____

Home Phone _____ Cell Phone _____

I waive my right to see this and other reference forms and I agree that this recommendation shall remain confidential.

Signature _____ Date _____

The above student has applied for admission to Applied Life Leaders Academy, a Christian internship committed to building leadership into this generation by teaching them to apply God's Word to their daily lives. Completing this reference will assist us in both the admission decision and transition into a new level of responsibility required at Applied Life Leaders Academy should the applicant be enrolled.

IMPORTANT NOTE!

To the Individual Completing This Form: If the applicant has not signed the waiver above, it is possible that the reference may be seen by the applicant if he or she is accepted and enrolls as an intern. If the waiver is signed, the reference will remain confidential.

THIS SECTION TO BE COMPLETED BY THE INDIVIDUAL PROVIDING THE CHARACTER REFERENCE

This recommendation is from a: (please check one)

☐ Pastor ☐ Principal/Administrator ☐ Teacher ☐ Youth Pastor ☐ Employer ☐ Other

How long and in what capacity have you known the applicant?

Do you believe the applicant to be genuinely saved? ☐ Yes ☐ No

How is this evidenced? _____

Does the applicant's lifestyle indicate a desire to live according to Biblical principles and be separated from worldly actions or attitudes? ☐ Yes ☐ No

If no, please explain _____

Do you know of any specific struggles, past or present, this person may have encountered? (i.e., moral failures, alcohol, drugs, cigarettes, police record, foul language, cheating, other integrity issues, etc.) ☐ Yes ☐ No

If yes, please explain _____



**THIS SECTION TO BE COMPLETED
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Would you hire the applicant to work for you? ☐ Yes ☐ No (If no, please explain) _____

Is this applicant the kind of person with whom you would want your son or daughter to be close friends?

☐ Yes ☐ No (If no, please explain) _____

Is the applicant appropriate in his or her response to parental authority, school authority, or pastoral authority?

☐ Yes ☐ No ☐ Don't Know (If no, please explain) _____

Does the applicant have a good reputation in his or her relationship with the opposite sex?

☐ Yes ☐ No ☐ Don't Know (If no, please explain) _____

What do you consider the applicant's strengths? _____

What do you consider the applicant's weaknesses? _____

What is your estimate of the applicant's potential for success in a church internship?

☐ May encounter some difficulty ☐ Average ☐ Above Average ☐ Superior

Is the applicant engaged? ☐ Yes ☐ No ☐ Don't Know

Has the applicant been married before? ☐ Yes ☐ No ☐ Don't Know

Additional Comments: _____

SPECIFIC RECOMMENDATION

☐ Enthusiastically recommend

☐ Do not recommend for Applied Life Leaders Academy

☐ Recommend with reservations

☐ Prefer not to make any recommendation

Signature _____ Print Name _____

Address _____ City _____ State _____ Zip _____

Daytime Telephone _____ Date _____

Can we contact you if necessary? ☐ Yes ☐ No