



CONFIDENTIAL REFERENCE FORM

TO BE FILLED IN BY A SPIRITUAL LEADER

..... is applying to Youth With A Mission Slovakia to join as a Short-term Staff/Volunteer worker. We would be grateful if you will fill in this form and return it to YWAM Slovakia as soon as possible either by post or email. (See address at the bottom of the page).

First, please identify yourself:

Name:.....Position:.....
Address:.....Place.....
Telephone number:..... Email.....

How long have you known the applicant?.....

Please comment briefly on the following:

Describe his/her growth as a Christian:

.....
.....

How has he/she been involved in Christian ministry/in the mission?

.....
.....

Do you know his/her family? Is there anything that would be helpful for us to know?

.....
.....

Is he/she generally an outgoing or a reserved person:.....

How would you evaluate the following (please tick):

Health	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>
Appearance	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>
Financial responsibility	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>
Work habits	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>
Family relationships	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>
Church attendance	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>
Sociable	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>
Initiative	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>
Pastoral heart	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>
Heart for evangelism	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>

Would you recommend this individual to join Youth With A Mission Slovakia? YES__ NO__

Please make any other comments on the back of this form that would be helpful as we evaluate this applicant to join YWAM Slovakia.

Your signature:.....Date: ... /... / 201...
dd/mm/yy