

PIHOP School of Ministry
Pastoral Recommendation Form

TO BE COMPLETED BY THE APPLICANT

Name: _____ Phone: _____

Date: _____ Email: _____

TO BE COMPLETED BY THE PASTORAL REFERENCE

Please return this form directly to the applicant in a sealed and signed envelope so that they may submit all components together as one packet.

If you have any questions, please email us at school@pihop.com

Name: _____

Church Name: _____

Staff Position: _____ Church Phone: _____

Church Address: _____

City, State, Zip: _____

Contact Phone: _____ Email: _____

1. How long have you known the applicant? How well do you know them?

2. Please describe the applicant's level of involvement in your church.

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3. What is the applicant's effect on his/her peers?

4. Has the applicant served your congregation in any capacity? () Yes () No
If Yes, please give a brief description.

5. What is your assessment of the applicant's ability to handle situations involving change, crisis and correction?

6. According to your observations, what are the strengths and spiritual gifts of the applicant?

7. According to your observations, what is your assessment of the applicant's weaknesses and struggles?

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8. Are you aware of any complex family or relational factors that might affect the applicant's time at the PIHOP School of Ministry?

9. Please assess the applicant in the following areas:

	Uncertain	Weak	Fair	Good	Outstanding
Spiritual Maturity	()	()	()	()	()
Devotion to Jesus Christ	()	()	()	()	()
Integrity and honesty	()	()	()	()	()
Openness to correction	()	()	()	()	()
Self-discipline	()	()	()	()	()
Working w/o supervision	()	()	()	()	()
Willingness to serve	()	()	()	()	()
Ability to work with others	()	()	()	()	()
Communication skills	()	()	()	()	()
Leadership Skills	()	()	()	()	()
Reliability	()	()	()	()	()
Teachability	()	()	()	()	()
Emotional stability	()	()	()	()	()
Physical Health	()	()	()	()	()
Family Life	()	()	()	()	()

Additional Comments or Explanations:

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10. Do you recommend this applicant for PIHOP School of Ministry?

() Highly recommend () Recommend () Recommend with reservations*

() Do not recommend

* Please Explain

Additional comments of explanations not already covered?

Signature: _____ Date: _____