



"Excellence to the glory of God"

PASTORAL RECOMMENDATION FORM

(To be completed by the Pastor)

1. Applicant's Information

- Last name and first name(s): _____ / _____
- Date of birth: _____ / _____ / _____
- Local church: _____
- Address : _____
- Postal code: _____ City: _____
- Country: _____
- How long has the applicant been attending your church? _____
- Did he/she receive his/her water baptism in your church? Yes No
- If Yes, year of baptism: _____
- Does he/she have a ministry or hold a position of responsibility? Yes No
- If yes, please specify: _____ / _____ / _____
- _____ / _____ / _____
- Please comment (if necessary):



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2. Pastor's Information

- Last name and first name(s): _____ / _____
- Function within the church: _____
- Name of the church: _____
- Address of the church: _____
- Telephone(s): (1) _____ (2) _____
- Email: _____ @ _____
- Other (specify): _____

3. Spiritual and Moral Assessment of the Applicant

- How long have you known the applicant personally?

- In your opinion, what is the candidate's level of spiritual maturity?

- Does the candidate demonstrate the following qualities? (Please tick the boxes that apply)

- Faithfulness in the Christian life
- Spiritual maturity
- Spirit of service
- Good reputation
- Aptitude for Bible study
- Emotional and relational stability
- Respect for spiritual authorities
- Long-term commitment to the church



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- Do you have any reservations about his application to Bible/Theological training?

Yes No

- If so, please explain briefly:

4. Recommendation

- I recommend this person for enrollment in biblical/theological training:

Without reservation
 With reservation
 I do not recommend

- Additional comments (optional):

5. Date & Signature

Done at: _____

Date: _____ / _____ / _____

Signature of the Pastor: _____

(Stamp of the church if available)