



FRIEND RECOMMENDATION

Name of Applicant (Individual Applying for Licensing/Ordinations)
First name Middle name Last name

The above named person is applying for Ministerial Credentials with RHEMA Ministerial Association International. The questions listed below should be answered honestly and correctly, for serious consideration will be given to your answers.

Our files are kept confidential, so please complete this form to the best of your ability and return it to our office in the envelope provided.

1. How long have you known the above person? _____ years.

2. Has your relationship been: Intensive Very close Close Casual
 Intermittent Distant Other _____

3. What has been the nature of your acquaintance? Were you . . .

CHURCH: Pastor Church Leadership Praise and Worship Leader
 Co-worker Other

SOCIAL: Friend of the family Personal friend Neighbor Other _____

4. To your knowledge, does this individual have a definite call to the ministry?

Yes No Do not know

Comments _____

5. To your knowledge, is applicant currently involved in active ministry?

Yes No Do not know

6. Pulpit Experience/Preaching and Teaching:

Well-experienced required
 Light experience
 No experience
 Do not know requirements

7. Work Ability (in the ministry):

Very industrious; does more than
 Satisfactory work ability
 Enough to get by
 Does not meet minimum
 Do not know

8. Stability/Ability to withstand pressure:

Tolerates pressure well
 Average tolerance/usually remains calm
 Easily irritated
 Cannot handle pressure

9. Personal Organization:

Conscientious, tidy, and clean
 Fairly neat
 Tends to be disorderly
 Disorderly and untidy

Do not know

Do not know

10. Response/Attitude to Authority:

- Helpful and cooperative
- Usually responsive
- Resentful of authority
- Not cooperative/very resentful
- Do not know

11. Emotional Stability:

- Self-controlled and mature
- Usually stable
- Moody and changeable
- Many uncontrolled periods/unstable
- Do not know

12. From your knowledge of the applicant's general character, past record, and present behavior, check any of the following which apply:

- | | |
|---|--|
| <input type="checkbox"/> Uses tobacco | <input type="checkbox"/> Has been involved in serious community disturbances |
| <input type="checkbox"/> Gambles | <input type="checkbox"/> Has been arrested or served time in prison |
| <input type="checkbox"/> Drinks alcoholic beverages excessively
moral weakness | <input type="checkbox"/> Has a reputation for involvement in behavior indicating serious |

13. Having observed this person in the ministry, would you:

- Highly recommend
- Recommend
- Recommend with reservations
- Please list reservations _____

- Not recommend
- I do not know enough about his/her ministry to make a valid recommendation

14. Please give us your personal comments on the integrity of the applicant to aid us in our decision-making.

Applicant recommended by:

Name: _____

Signature: _____ Age: 18-25 26-35 36-50 over50

Email: _____

Address: _____

Zip: _____ City: _____ Country: _____

Telephone: _____

Ministry Name _____

Your Position _____

Organization of Ordination _____ Year _____

Are you a RHEMA graduate? _____ Year(s) _____

Which RBTC did you graduate from? _____