

CAPITAL BAPTIST DEAF COLLEGE

360 EDNOR RD • SILVER SPRING, MD • 20905

Pastor Reference Form

Please type or print clearly

PART I

TO THE APPLICANT: Print your name and address on the lines below along with your pastor's name. Give this form to the pastor with a stamped envelope addressed to the office of Registrar at Capital Baptist Deaf College.

Name of Applicant _____
First Middle Last

Applicant's Address _____
Number & Street City State Zip

Name of Pastor _____
Title First Last

PART II

TO THE PASTOR: The person named above has applied for admission to Capital Baptist Deaf College and has given your name as a reference to evaluate his/her character and ability. This reference is a vital part of the admissions process so please be honest and candid as possible. The information you provide will, of course, be treated in the strictest of confidence.

Please check the appropriate box indicating the candidate's ability and competence in the following areas.

MINISTRY EXPERIENCE

| In this person: | Superior | Good | Average | Poor | Unknown |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Actively involved in ministry? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Faithful and dependable? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Able to be mentored/trained in a variety of ministries? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

APTITUDE FOR PROBLEM SOLVING

| Does this person: | Superior | Good | Average | Poor | Unknown |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Foresee and face problems realistically and objectively? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Process information well and arrive at good decisions? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Accept well-meaning criticism and use it constructively? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

INTERPERSONAL REALTIONSHPIS

| Does this person: | Superior | Good | Average | Poor | Unknown |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Dress neatly and appropriately? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Have acceptable social skills? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Encourage and edify others in love? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Exercise leadership abilities when the need arises? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

CHARACTER

| In this person: | Superior | Good | Average | Poor | Unknown |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Teachable? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Consistent in maintaining an ethical and moral lifestyle? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Striving to grow spiritually? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

FINANCIAL RESPONSIBILITY

| Does this person: | Superior | Good | Average | Poor | Unknown |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Evidence maturity in money matters? (credit, planning ahead, etc.) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Have a good plan for covering the costs of college education? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Faithful in tithes and love offering? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

SUPPORT

| Does this person: | Superior | Good | Average | Poor | Unknown |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Have the support of their spouse / family to attend college? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Have the support of their church to attend college? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Have the support of their pastor to attend college? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Please explain the nature of your relationship to the applicant. Include frequency and duration of contact which serves as the basis for your impression of the application:

What are the applicant’s greatest strengths?

What areas in the applicant’s life need improvement?

For what type of ministry do you think the applicant should be equipped?

Please check ONE:

I recommend that the applicant be accepted. YES / NO

Signature _____ Date _____

Email _____ Telephone Number _____