

# Minister's Recommendation

To be filled out for those who do not attend New Hope Ministries

Name of Applicant	Mr. Mrs. Miss	LAST	FIRST	MIDDLE		
Address	NUMBER and STREET		CITY	STATE	ZIP	( ) PHONE
Social Security Number	- -		/			
			SEMESTER	YEAR PLANNING TO ATTEND		
<p>Please read before distributing form. This form should be completed by your minister and returned by him directly to New Hope Ministries. If your father is your minister, please refer the form to the assistant minister or lay leader in your church. <b>If a person other than your minister (or assistant minister) completes the form, an explanation should be provided.</b> I understand that this confidential statement is being submitted with the understanding that its content will not be shared with me. I hereby waive my right to see the confidential statement submitted on this form.</p>						
<hr/>						
APPLICANT'S SIGNATURE						

Area in box to be filled out by Applicant and then forwarded to your minister.

## To The Minister

Each applicant for admission to New Hope School of Ministries must submit a recommendation. Serious consideration will be given to your comments; therefore, we ask that you complete the form carefully. It should be returned directly to **New Hope School of Ministries, 7675 Davis Blvd, Naples, Florida, 34104.** Since we request a candid evaluation, we will hold your comments in strictest confidence. *Thank you for your time and assistance.*

**To be filled out by minister:**

- How long have you known the applicant? \_\_\_\_\_
- How well do you know him/her? (*check one*)  
☐ By name/sight  
☐ Casually – few personal contacts  
☐ Fairly well – numerous personal contacts  
☐ Very close pastoral relationship
- To your knowledge has the applicant made a meaningful personal commitment to Jesus Christ?  
☐ Yes      ☐ No      ☐ I don't know

Comments: \_\_\_\_\_

- Please indicate applicant's level of involvement in church activities. (*check one*)  
☐ Attends irregularly; shows little interest  
☐ Seldom participates although attends regularly  
☐ Cooperative; usually willing to help  
☐ Enthusiastic; deeply involved
- What do you consider the applicant's strong points? Include positive personal traits. \_\_\_\_\_

6. What do you consider the applicant's weak points? Include negative personal traits. \_\_\_\_\_

7. Please check the terms which best describes the student's attitude toward the church and its activities.

☐ Warmhearted

☐ Enthusiastic

☐ Loving

☐ Sympathetic

☐ Respectful

☐ Tolerant

☐ Passive

☐ Contemptuous

☐ Critical

8. This applicant's spiritual influence on his peers is ☐ Positive ☐ Neutral ☐ Negative

9. How do you rate this person in the following areas?

	Excellent	Above Average	Average	Below Average	No Chance to Observe
Leadership					
Responsibility					
Christian commitment					
Initiative					
Cooperativeness					
Personal appearance					
Moral character					
Health					
Social adaptability					
Integrity & honesty					
Emotional stability					

10. To your knowledge does the applicant: ☐ Smoke? ☐ Drink? ☐ Use illegal drugs?

Comments: \_\_\_\_\_

11. Does the applicant have personality traits that impair his relationship with others? ☐ Yes ☐ No

12. Please share with us any information you may have about the applicant that would help in our evaluation. This information could cover recent experiences or incidents in the applicant's life, or general personality appraisal. \_\_\_\_\_

Minister's Name \_\_\_\_\_

Name of Church and Denomination \_\_\_\_\_

Address \_\_\_\_\_

STREET

( )

CITY

STATE

ZIP

PHONE

Return to: New Hope School of Ministries, 7675 Davis Blvd., Naples, Florida 34104, 239.348.0122  
Attention: Gwen Brown or email [gbrown@newhopenaples.com](mailto:gbrown@newhopenaples.com)