

Pastoral/District Superintendent Recommendation Form

This form should be filled out by the pastor of the applicant. In the case where a pastor is applying for admission, the form should be filled out by the district superintendent or equivalent if the applicant is from another Apostolic organization. This form should be submitted by the recommender or submitted by applicant with envelope sealed with signature of recommender in order for forms to be accepted.

Return to:
 704 Howdershell Rd.
 Florissant, MO 63031

 Phone: 314.921.9290
 Fax: 314.921.9203
 Email: rmorley@ugst.org

TO BE COMPLETED BY THE APPLICANT

Name: _____ Social Security #: _____
First Middle Last

Address _____ Phone _____ Email _____

TO THE APPLICANT: The Family Education Rights and Privacy Acts of 1974, also known as the Buckley Amendment, gives students the right to inspect and review their educational records. This includes the right to read specific confidential statements and letters of recommendation. In order to protect the confidentiality of your recommendation you may waive this right. Please indicate your decision to waive or not to waive this right by checking the appropriate statement and signing your name on the line below.

- 1. I waive my right to examine this recommendation.
- 2. I do not waive my right to examine this recommendation.

Applicant's Signature: _____ Date: _____

TO BE COMPLETED BY THE RECOMMENDER

1. Recommender's Name: _____

2. Address: _____

3. Daytime phone: () _____ 4. Job title: _____

5. Relationship to the applicant: _____ 6. How long have you known the applicant? _____

7. Do you know of any physical, mental, spiritual or emotional problems which might hinder effective work in Christian ministry? If yes, please elaborate on the back of this sheet (or on line after boxes).

No Yes

	Above Average	Average	Below Average	No information
Christian character and integrity	3	2	1	N
Church involvement	3	2	1	N
Maturity	3	2	1	N
Leadership skills	3	2	1	N
Knowledge of the Bible	3	2	1	N
Aptitude for ministry	3	2	1	N
Communication skills	3	2	1	N
Intellectual ability	3	2	1	N
Interpersonal skills	3	2	1	N
Financial Responsibility	3	2	1	N

9. Do you know of any personal habits or prejudices which might hamper service in a church-related position?
If yes, please elaborate below.

10. Do you believe the applicant evidences a clear sense of divine calling on his/her life?
Please circle one:

Definitely Likely Uncertain Doubtful

11. Do you recommend this person for admission? Yes No
If yes, please circle one:

With enthusiasm With confidence With reservation With reluctance

12. Thank you for your thoughtful response. If further questions regarding the candidate arise, may a member of the Admissions Committee contact you by phone? Yes No

Please return to: **Director of Admissions**
Urshan Graduate School of Theology
704 Howdershell Rd.
Florissant, MO 63031

Signature: Date:

Please type or print with black ink any additional comments you might have in the space provided below: