



CONFIDENTIAL PASTORAL REFERENCE

Applicant's Name: _____
City, Province/State: _____

Position applied for _____
Date _____

Pastor's Information

Name _____
Email address _____ **Phone** _____

We are striving to keep the standards of our work and workers high, accepting only those with a good Christian testimony and a desire to serve the Lord. Please answer frankly and to the best of your knowledge. All information will be kept confidential. Thank you for your time.

1. Are they suitable for a term of missionary service? _____
2. How have they participated in your church activities and ministries? _____

3. How do they relate to people in your church and community? _____
4. Is there any indication that their decision to enter this service has been significantly influenced by a desire to escape personal, or vocational situations? _____
5. Do they give evidence of genuine conversion? _____
6. Do they uphold the standards of New Testament Christian living? _____
Conscientiously or out of obligation? _____
7. Would they be an asset to Christian service? _____
8. Do you know of anything that may disqualify them for Christian service?
9. To which age group do you feel they best relate?
Children Youth Adults
10. For each trait listed below, check one statement which in your judgement best describes them.

Christian experience

Rich and contagious
Genuine but mild
Relatively superficial

Dependability

Very trustworthy
Intends to fulfill responsibilities
Personal agenda comes first

Willingness to serve

- Eagerly serves
- Serves upon request
- Reluctant to serve

Doctrine

- Has carefully chosen beliefs
- Depends on others for beliefs
- Beliefs are vague and/or questionable

Leadership

- Easily directs others
- Leads as requested
- Seldom gains support

Witness

- Shares faith naturally
- Hesitant to share faith openly
- Does not talk about faith

11. List what you see as their three greatest strengths and weaknesses.

Strengths

Weaknesses

12. Is there anything else that you feel would be important for us to know?

This reference has been completed by:

Signature _____

Printed name _____

Physical Address _____

Please return this form to:

Northern Youth Programs
 Attn: Human Resources
 Email: personnel@nyp.ca
 Fax: 1.807.937.5524

By Mail in US
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By Mail in Canada
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