

1. Is the applicant active in Church work? YES NO

2. Does he/she display high moral standards? YES NO

If NO please explain: _____

3. is he/she prejudiced against groups, races or nationalities? YES NO

If YES, please explain: _____

4. With reference to his/her Christian service, do you consider the applicant to be:

DEDICATED AVERAGE CASUAL Please explain: _____

5. In your opinion, which of the following would best describe the applicant's Christian experience?

MATURE GENUINE & GROWING OVER-EMOTIONAL SUPERFICIAL

Comments: _____

6. Please comment on the applicant's family background (if known).

7. Please add any other relevant remarks: _____

8. Would you recommend the applicant for acceptance into the Ministry Training Institute?

YES WITH SOME HESITATION NO If NO, please explain: _____

I HAVE KNOWN _____ FOR _____ YEARS, AND BELIEVE THAT HE/SHE POSSESSES THE QUALITIES INDICATED ABOVE.

Signed: _____ Date _____

Name: _____

Address: _____

_____ Phone: () _____

Would you like to receive further information about the Kelowna Christian Center Ministry Training Institute? YES NO

Please Direct all forms to:



**Dean of Students
Ministry Training Institute
905 Badke Rd.
Kelowna, B.C. V1X 5Z5**