

Ministers Recommendation Form

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Registered Address:
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THIS INFORMATION SHOULD BE SENT DIRECTLY TO CBI AND WILL BE HIGHLY CONFIDENTIAL.

1. Name of Prospective Student:

Title: Mr ☐ Mrs ☐ Miss ☐ Rev ☐ Dr ☐ Other:
Last Name: Maiden Name:
First Name: Middle Name:

The above mentioned has applied for enrollment as a student at Carmel Bible Institute. Serious consideration will be given to your comments on this recommendation form, therefore we ask that you complete it carefully. Since we request a candid evaluation, your remarks will be held in strict confidence.

A. DETAILS OF RECOMMENDING MINISTER

1. Name of Recommending Person:

Title: Mr ☐ Mrs ☐ Miss ☐ Rev ☐ Dr ☐ Other:
Last Name: Maiden Name:
First Name: Middle Name:

2. Contact Numbers:

Mobile/Home No:
Work No:

3. Postal Address:

Post Code:

4. Residential Address: (If not the same as above)

Post Code:

5. Church Name:

6. Church Address:

Post Code:

7. Position in Church:

How long have you held this position?

8. Are you a graduate of: ABTC ☐ Yes ☐ No ☐
CBC ☐
CBI ☐

If Yes, which year?

MINISTERS RECOMMENDATION FORM CONTINUED...

B. EVALUATION OF APPLICANT

1. How long have you known the applicant?

2. Describe your relationship: Very Close ☐ Close ☐ Casual ☐ Distant ☐

3. Describe the nature of your relationship: Pastor ☐ Friend ☐ Co-Worker ☐
Ministry ☐ Family ☐ Other Specify:

4. Please evaluate the applicants character and lifestyle (E=Excellent, G= Good, F=Fair, P=Poor, U=Unknown)

E G F P U

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Christian life and testimony
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Honesty and integrity
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Ability to work with others
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Co-operativeness
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Financial responsibility

E G F P U

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Moral Character
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consideration for others
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Appearance/acceptance
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Response to authority/instruction/discipline
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Dependability

5. Emotional Evaluation:

Very Stable ☐ Stable ☐ Unstable ☐ Very ☐

6. What do you consider to be the applicants strong and weak points:

7. Briefly describe the applicant's married/family life:

8. Does the Applicant associate with people of good moral character? Yes ☐ No ☐

9. Indicate the terms which describe the applicant's attitude towards the church and its activities:

Warmhearted/Enthusiastic ☐ Tolerant/Passive ☐ Critical/Contemptuous ☐

10. Is the applicant involved in active ministry? Yes ☐ No ☐ Unknown ☐

11. Do you recommend the applicant be considered for CBI? Yes ☐ No ☐ Unknown ☐

12. Please give any comments that would be helpful in evaluating the applicant:

(continue on a separate sheet if necessary)

Date

Signature of recommending Minister