

City Harvest School of Theology

Recommendation Form of Applicant (Form B1)

(To be completed by Pastor / Cell Group Leader)

Applicant's Information

Surname: _____

Given Name: _____

Cell Group: (if applicable) _____ Cell Group Leader: _____

Zone Pastor / Zone Supervisor: _____

Name of Church: _____

Home Address: _____

Zip Code: _____ City: _____

State: _____ Country: _____

Citizenship: _____

Telephone (Home): _____ Handphone: _____

Telephone (Office): _____ Gender Male Female

Passport / NRIC No.: _____ Date of Birth: _____
DD MM YY

I understand that this confidential statement is being submitted to the Students Admissions Office with the understanding that its contents will not be shared with me. I hereby waive my right to see the confidential statement submitted on this form.

Signature of Applicant_____
Date**To You that Give the Recommendation**

Full Name: _____

Name of Church: _____

Home Address: _____

Zip Code: _____ City: _____

State: _____ Country: _____

Telephone (Home): _____ Handphone: _____

Telephone (Office): _____ Profession: _____

Serious consideration will be given to your comments. We are well aware of the fact that this is your personal opinion of the person's character and not a professional statement. Please answer the questions as sincerely and as thoroughly as possible. You will not help the applicant by withholding information which you think might have a negative impact upon our judgment. It is the truth that sets us free. The applicant, as you now recommend, cannot be accepted until we have received all recommendation. Therefore, we ask you to return the recommendation as soon as possible, in a sealed envelope, to the applicant or send the letter directly to us. Since we request a candid evaluation, we will hold your comments in strictest confidence.

1. How long have you known the above person? _____ Years _____ Months

2. How has your relationship been? Intensive Very Close Close Casual
 Intermittent Distant Others: _____

3. What has been the nature of your acquaintance?

- Church: Pastor Cell Group Leader Music Director
 Co-worker Fellowship Others: _____
- Business: Employer Supervisor Co-worker Subordinate
- School: Principal Teacher Fellow student
- Social: Friend of the family Personal friend Neighbor Others: _____

4. Please evaluate his/her personal character:

- Integrity and honesty: Excellent Good Fair Poor Unknown
- Ability to handle pressure: Excellent Good Fair Poor Unknown
- Acceptance of instruction and/or discipline: Excellent Good Fair Poor Unknown
- Ability to work with others: Excellent Good Fair Poor Unknown
- Ability to lead others: Excellent Good Fair Poor Unknown
- Academic ability: Excellent Good Fair Poor Unknown
- Consideration for others: Excellent Good Fair Poor Unknown
- Cooperativeness: Excellent Good Fair Poor Unknown
- Moral character: Excellent Good Fair Poor Unknown
- Financial responsibility: Excellent Good Fair Poor Unknown
- Personal cleanliness: Excellent Good Fair Poor Unknown
- Social: Excellent Good Fair Poor Unknown

5. How industrious is he/she as a student or worker?

- Unusually conscientious, hard worker Works less than most others
- Works harder than most students/workers Very lazy
- Does about as much work as most others Have no basis for judgment

Comments: _____

6. Is the applicant prompt in paying his/her bills? Yes No Have no basis for judgment

7. How does he/she get along with other people?

- Well-liked Gets along with others Gets along as well as most others
- Sometimes has difficulty Is strongly disliked Have no basis for judgment

8. How emotionally stable do you think he/she is?

- Seems quite stable Seems to have minor difficulties
- Seems to have serious emotional difficulties Have no basis for judgment

9. What is your estimate of his/her leadership ability?

- A forceful and capable leader Displays average ability to guide and to direct
- A better follower than leader Have no basis for judgment

10. Does the applicant commit to his/her Church's vision? Yes No Have no basis for judgment

11. Does the applicant embrace sound doctrine?
(ie. Statement of Faith in the Church) Yes No Have no basis for judgment

12. The applicant's spiritual influence on others is: Positive Neutral Negative

13. What kind of companions does he/she usually associate with?

14. Have you ever questioned the applicant's morals? Yes No

If Yes, please comment: _____

15. Please describe the applicant's home life and marriage (if applicable):

16. Have you noted any physical weakness or emotional problem that would hinder the applicant in an intensive academic environment? Yes No

If Yes, please comment: _____

17. To your knowledge, does the applicant:

Smoke

Use illegal drugs

Non Applicable

Drink

Have problems relating to the opposite sex emotionally/physically

If Yes, please comment: _____

18. Does the applicant have any previous medical history that might affect his/her studies?

19. What do you consider are the applicant's strong points?

20. What do you consider are the applicant's weak points?

21. Do you recommend the applicant? Yes No Not sure

Signature

Date

Do ensure that the applicant's name, address and telephone numbers are filled in at the head of the recommendation.

Please send this recommendation form in a sealed envelope back to the applicant or you can mail it direct to us at:

**City Harvest School Of Theology
Student Admissions Office
Raffles City, P.O. Box 0625
Singapore 911721
Republic of Singapore**

IMPORTANT NOTE:

SOT is committed to maintaining the confidentiality of the student's personal information and undertakes not to divulge any of the student's personal information to any third party without the written consent of the student.