



Pastor Recommendation

Applicant: Please fill in the top four lines before you give this to your pastor to complete!

1. Applicant's name: _____
Last First Middle Nickname

2. Home address: _____
Street City State Zip

3. I have applied to participate on a short term mission trip to _____
Country

4. The mission service planned for this trip is _____
(VBS, medical, construction, music, etc.)

Name of Pastor: _____

Instructions to Pastor: The above applicant needs your recommendation for a short term mission trip with KOSMOS Ministries. Please complete this form carefully and candidly, and mail it directly to us. In appreciation of your straightforward comments, we will handle this recommendation with strictest confidence. Thank you for your full assistance.

1. How long have you known the applicant? _____

2. How well do you know him/her?
- Just by name and/or sight
 - Casually, have had a few personal contacts
 - Fairly well, have had a number of personal contacts
 - Have had a very close relationship

3. To the best of your knowledge, is the applicant living a Christian life? Yes No

Comments: _____

4. To what extent is the applicant engaged in the activities of the church?
- Is not regular in attendance. Little interest in activities.
 - Seldom participates in activities, although regularly attends services.
 - Is cooperative and usually willing to help in various activities.
 - Enthusiastically engages in activities.

5. In what forms of Christian service has the applicant been regularly active (i.e. church, Sunday school, youth group, choir, etc.) _____

6. If the applicant does not participate, do you know why? _____

7. In your opinion, does the applicant possess any outstanding qualities? Yes No
Please describe: _____

8. Do you place confidence in the applicant's integrity? Yes No



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9. Does the applicant have any questionable personal habits? Yes No

Please explain: _____

10. Are there personality traits which hinder this applicant in his/her relationship with others?

Yes No Please explain: _____

11. Are there any special circumstances with this applicant which the administration ought to know about in dealing wisely and sympathetically with him/her? Yes No

Please explain: _____

12. How would you rate this person in the following areas?

	Outstanding	Superior	Above Average	Average	Below Average
Leadership					
Emotional Stability					
Church Attendance and Participation					
Follow through on commitments					

13. Do you recommend this applicant for a short term mission trip? Yes No

Pastor's Name: _____
Printed

Signed

Position: _____

Church Name: _____

Address: _____
Street City State Zip

Phone No. _____ Date: _____

***This information is both confidential and essential.
 Please return as soon as possible in the self addressed, stamped envelope to:***

P.O. Box 1324 Winder, GA 30680
 Phone: 706-255-8711 www.kosmosministries.org