



# 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