

MINISTER'S REFERENCE

(SECTION II is to be filled out by the minister of the church where you are a member, where you attend or by someone who has been your minister within the past two years.)

SECTION I (to be completed by applicant)

NAME OF APPLICANT _____
(Last) (First) (Middle)

ADDRESS _____

TELEPHONE _____ SOCIAL SECURITY NO. _____

SECTION II (to be completed by the applicant's minister)

Please answer these questions frankly and return to the Office of Admissions at New Creations Chapel, Inc.

1. Please give an explanation of the applicant's willingness to cooperate well with his/her peers and with those in authority.
2. What specifically would lead you to believe this applicant is dependable?
3. Have you had occasion to observe this applicant being honest and fair? Please explain.
4. Please identify the applicant as an average, active, or indifferent participant in the affairs of the church.
5. What evidences does the applicant show of a conversion experience?
6. To the best of your knowledge does the applicant refrain from the use of alcohol, drugs and tobacco? Total abstinence? Occasional social drink? Struggling to control habit?

