

3D Training Centre Canada

Spiritual Recommendation Form



Instructions

For the Applicant: Please ask your elder (pastor) or other spiritual mentor to complete this form and mail it directly to the Admissions Office at the following email address:
bret.nazworth@gmail.com

For the Spiritual Mentor: The applicant below is applying for admission to the **3D Training Centre**, an intensive program of Disciple Makers Multiplied designed to prepare young adults for a life of service to Jesus Christ.

Thank you for your prayerful and honest evaluation of the applicant and your timely submission of this form. All information will be kept confidential and will not be shared with the applicant. Once you have completed the form, please email it directly to us; do not return it to the applicant. **Thank you.**

Office use only:

Name of Applicant: _____
Last Name First Name Middle Name

Your Name _____ Your Title _____
 Assembly _____ Your phone _____ Your Email _____
 Assembly Address _____
Street City Province postal code

How long have you known the applicant? _____ **How long has he/she attended assembly?** _____

How well do you know the applicant? (choose only one): _____ Very close/personal relationship
 _____ Fairly well/many interactions _____ Casually/few personal contacts _____ By name and sight only

Additional comments: _____

- To your knowledge, has the applicant trusted in Christ as Savior? Yes No Not sure
- Is the applicant faithful in attending meetings? Yes No Not sure
- Is the applicant engaged in the life of the congregation? Yes No Not sure
- Do you believe the applicant is enthusiastic about his/her faith? Yes No Not sure
- Do you know if the applicant is involved in Christian service? Yes No Not sure
- Do you know if applicant is reliable to pay debts and keep word? Yes No Not sure

Please give additional comments on any of the above questions: _____

Do you have any doctrinal concerns or warnings you would like to share concerning the applicant? _____

What can you tell us about the applicant's participation in the local assembly? _____

Please give your thoughts about the applicant's spiritual development and potential as a believer: _____

Are there any issues or needs that might impair the applicant's relationship with others? ___ Yes ___ No
If so, please explain: _____

To your knowledge is the applicant free of addictions? ___ Yes ___ No ___ Not sure
Please explain what you know: _____

Are you aware of anything that may negatively affect the applicant's participation in school or dorm life?
If yes, please explain: _____

To your knowledge has the applicant ever been accused of any of the following:

Child abuse? Yes ___ No ___ Crimes involving or against minors? Yes ___ No ___

Accusation of sexual molestation of a minor? Yes ___ No ___ **If yes to any, please share what you know:**

Please rate the applicant on each of the following:

	Excellent	Average	Poor	Unknown
Reliable , dependable, responsible				
Mature , able to cope with life situations				
Emotionally stability , reaction to stress, poise, mood stability				
Motivated , genuine, and committed				
Good judgment , able to analyze and solve problems				
Oral expression , clear, coherent				
Relationship with others , good rapport, cooperative, malleable				
Empathy , sensitivity to the needs of others				
Leadership , creative and decisive, self-confident				
Personal appearance , clean, well groomed				
Integrity , honest, of good moral character				
Work habits , good stamina, polite, conscientious, takes initiative				

Please include any additional information that might be helpful for us to know about the applicant:

I, _____, make the following recommendation regarding the
(Print Your Name Above)

admission of _____ to the Disciple Makers Multiplied **3D Training Centre**:
(Print Applicant's Name Above)

(choose only one) ___ recommend, ___ recommend with reservation, ___ decline to recommend