

Pastor/Youth Pastor Reference - Extension Student

Name of student applicant (Please type or print legibly) E-mail address

Street Address City State Zip

I plan to enroll Fall Spring Year: _____

I willingly waive my right of access to this letter of reference once it is filed.

Signature of applicant Date

To the Applicant:

Please complete the top portion of this page and submit this form to the pastor or youth pastor of your church. If you are related to your pastor and do not have a youth pastor, please give this form to a church leader. Do not give this form to a relative. For the benefit of the respondent, please attach to this form a stamped envelope addressed to Kansas City College and Bible School Admissions Office. (7401 Metcalf, Overland Park, KS 66204)

To the Respondent:

The student named above is applying to take extension classes from Kansas City College and Bible School and is asking you to supply information as to his/her academic ability and preparation for college work. KCCBS is a Christian institution with definite Christian goals. Our desire is to admit students who will profit the most from their enrollment. The Admissions Committee finds candid, thorough evaluations invaluable in the decision-making process, so please be frank, fair, and accurate in your remarks and estimates. Please return this form directly to the school in the envelope provided by the student. Please do not return it to the applicant. Thank you for taking time to give an evaluation.

1. How long have you known the applicant? _____ How well? slightly casually well
In what relationship? _____
2. Do you consider the applicant to be a sincere Christian? Yes No
Are the applicant's activities distinctly Christ-honoring? Yes No
3. Do you recommend this applicant for admission?
 Yes, with confidence Yes, with the following reservations No (Please explain)
4. Has the applicant been consistent in church attendance? Yes No
In what church activities has the applicant participated? _____
5. To your knowledge, has the applicant ever been convicted of a legal offense or been incarcerated?
 No Yes
6. To your knowledge, does the applicant drink, smoke, or take illegal drugs?
 No Yes - Explain _____

Please continue to fill out 

Please rate the applicant by circling the category that best describes him or her.

COOPERATION Willingness to work with people in various capacities	Outstanding	When convenient	Indifferent	Unwilling	Not observed
EMOTIONAL STABILITY Reactions in various situations when stress is likely	Very stable	Fairly stable	Easily elated or depressed	Unresponsive	Not observed
INITIATIVE Ability to see things that need to be done-resourcefulness; assertiveness	Seeks additional tasks	Willingly does more than expected	Does assigned tasks	Needs prodding	Not observed
JUDGMENT & COMMON SENSE Ability and foresight in decisions in everyday situations	Sound decisions	Fair deductions	Poor results	Lacks ability	Not observed
LEADERSHIP Ability to lead others	Consistently a leader	Usually a leader	Leads occasionally	Seldom or never leads	Not observed
ACCEPTANCE BY OTHERS Mannerisms and appearance, general impression on others	Well liked	Accepted	Tolerated	Rejected	Not observed
RELIABILITY Dependability, willingness, and consistency	Conscientious	Usually reliable	Erratic	Unreliable	Not observed
INFLUENCE Consider both positive and negative influence on others	Unusually wholesome	Consistently good	Varying influence	Passive, or negative	Not observed
COMMUNICATION SKILLS Ability to present thoughts with logic and clarity	Outstanding	Good	Has difficulty	Unable to communicate clearly	Not observed
WORK ETHIC Punctual, present, committed to goals, uses time well	Excellent	Good	Erratic	Has difficulty	Not observed
RESPECT FOR AUTHORITY Response to and attitude toward established authority	Unusually respectful	Good attitude	Indifferent to authority	Shows disrespect	Not observed

Questions? Contact us at KCCBS, 7401 Metcalf, Overland Park, KS 66204; by phone at 913-722-0272; or by email through our web site at www.kccbs.edu.

Signature: _____ Date: _____

Print Name _____

Name of Organization _____ Title: _____

Address: _____

City, State, Zip: _____ Phone: (____) _____

E-mail address: _____

Thank you!