

PASTORAL REFERENCE FORM

Guarderia Dios Provehera

Parcela 249 parta alta Maneadero, B.C. Mexico C.P. 22790

Scan and email form to: chloe.gdpoffice@gmail.com



And mail form physically to:

Claire Wagner 9640-B Mission Gorge Rd #315 Santee, CA. 92071

Please complete every question, and use additional pages if necessary.

Please print.

NAME OF MISSIONARY APPLICANT: _____

Reference Name: _____

E-mail: _____ Phone #: _____

Mailing Address: _____

City: _____ Province/State: _____

Postal Code: _____ Country: _____

1) How long have you known the applicant? _____ Are you well acquainted? _____

2) Do you consider the applicant to be sound in Christian faith and practice? _____

Why?

3) What special training, abilities, talents or personal qualities does the applicant have that would equip

him/her for effective Christian service? _____

4) What would you say of the applicant's conduct with the opposite sex?

5) Would you want the applicant as part of your staff? _____ Why? _____

2 7) What is the applicant's strengths?

8) What is the applicant's weaknesses? _____

9) Are you willing to recommend this individual as missionary candidate? _____ If not, please

state your objections.

10) Any other comments or information regarding the applicant's general fitness for Christian service would be greatly appreciated. (Please use other side of page if needed)

Date: _____ Signed: _____