



PASTOR RECOMMENDATION

TO BE COMPLETED BY APPLICANT

| | | |
|-----------------------------|-------|--------|
| Applicant's Full Name: Last | First | Middle |
|-----------------------------|-------|--------|

To Applicant: Should your church presently be without a minister or should your relative be your pastor, please give this form to the head layperson in your church along with a stamped envelope addressed to the **Admissions Office, Southwestern College, 2625 East Cactus Road, Phoenix, Arizona 85032.**

Be advised that due to the Family Education Rights and Privacy Act of 1974, the applicant has the right of access to this document unless he or she has signed the waiver statement below. *I willingly waive my rights of access to see this recommendation knowing that this waiver is NOT required as a condition of admission*

Applicant's Signature _____ Date: _____

Applicant's Address: _____

Phone: _____

Confidential Information

TO BE COMPLETED BY PASTOR OR YOUTH PASTOR

To the Referent: The above individual has applied for admission to Southwestern College and has given your name as a reference. Each applicant for admission must submit a recommendation from his or her pastor. Serious consideration is given to this recommendation and therefore we request that you complete the form carefully and candidly and return it directly to the address below. If the waiver statement above is not signed by the applicant and there is information which you prefer to communicate to the Admissions Office personally, you may call the Admissions Office: (602) 489-5300 or (800) 247-2697, ext. 100.

| | |
|-------------------------|-----------------|
| Recommender Name | |
| Title/Position | |
| Email | Phone () |

| | | | |
|--|--------------|---|-----|
| Name of Senior Pastor <input type="checkbox"/> (same as above) | | Name of Youth Pastor <input type="checkbox"/> (same as above) | |
| Title/Position | | Title/Position | |
| Email | | Email | |
| Church Name | Denomination | Phone () | |
| Address | City | State | Zip |

1. How long have you known the applicant?

2. How well do you know him/her?

By Name and Sight Casually Fairly Well Very Close

3. To the best of your knowledge, has the applicant been born again by faith in Jesus Christ? Yes No I don't know

4. To what extent is the applicant engaged in the activities of your church?

Actively participates Regular attendee Irregular attendee

5. In what forms of Christian Service has the applicant been regularly active? (i.e., Sunday School, Youth Groups, Choir, Orchestra, etc.)

6. If this applicant does not participate, do you know why?

7. To your knowledge does the applicant smoke, drink, or use habit-forming drugs?

Yes No If yes, please comment on question number 11

8. Please check the box for each category which, in your opinion, best describes the applicant

| | Strongly Agree | Agree | Unsure/Neutral | Disagree | Disagree Strongly |
|----------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Concern for others | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Influences others for good | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Respects authority | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Accepted by peers | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Discerning in friendships | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Initiative/Motivation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Leadership ability | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Gracious character | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Humility | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Moral character | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Comments

9. What are the applicant's special abilities?

10. Please describe home factors which might positively or negatively affect the applicant's success at Southwestern College.

11 Any additional recommendations or comments that you wish to make will be most helpful to the Admission Committee; i.e., personal habits, outstanding accomplishments, unfortunate problems, moral character, etc.

13. In your estimation, the applicant's spiritual influence on his/her classmates will be: (please check one)

- Strengthening
 Neutral
 Injurious
 I don't know

14. Pastor's specific recommendation:

- Recommended for admission
 Not recommended
 Please call to discuss

Recommender signature _____ Date _____

Thank you for completing this recommendation. It plays an important role in the admission process at Southwestern College. You may know of other prospective students who could benefit from the educational experience available at our institution. If you will use this opportunity to forward contact information about them, we will provide these students with information about our college. Thank you for your support of Christian Education!

Name _____ H.S. Grad Year _____

Street: _____

City _____ State _____ Zip _____

Phone # _____ E:mail: _____

Return all forms to: Admissions Office
Southwestern College / 2625 East Cactus Road / Phoenix, Arizona 85032
 (602) 489-5300 / (800) 247-2697 / Fax (602) 404-2159

Southwestern College does not discriminate on the basis of race, sex, age, national origin, or handicap in admissions or access to its programs.
 www.swcaz.edu