

Pastoral Recommendation

Name of Applicant: _____
Last *First* *MI*

Thank you in advance for your help in this application process. Each applicant is required to submit a pastor's recommendation as part of the application process for International Bible College internship. Because of your position as the spiritual authority in this applicant's life, your assessment of his/her spiritual development is important to us. Serious consideration will be given to your comments, so we ask that you please complete this form carefully and prayerfully. IBC seeks to admit students who will thrive in a distinctly Christian learning environment. Interns are committed to Christian values and are required to maintain values and principles outlined in our online brochure. Additionally, students will be required to refrain from the use or possession of alcohol, tobacco, pornography in any form, and immoral sexual behavior. They will be required to strive for a standard of purity as set forth in God's Word. Students will be counseled in these areas if necessary. If you have any questions, please call us at (504) 246-5121.

Name: _____ Church Phone: _____

Church Name/Address: _____

Email: _____

How long and in what capacity have you known the applicant? _____

Do you feel that the applicant has the necessary qualities to succeed in IBC? ____ Yes ____ No

Do you feel that the applicant has a personal relationship with Jesus Christ? ____ Yes ____ No

To the best of your knowledge, is the applicant's present conduct in accordance with IBC policies described above? ____ Yes ____ No

Please briefly comment on the applicant's participation in the activities of your church/organization:

Please circle the most appropriate response for the following:

| | | | | |
|---------------------|---------------|---------|---------------|-----------|
| Emotional Stability | Below Average | Average | Above Average | Excellent |
| Leadership Ability | Below Average | Average | Above Average | Excellent |

| | | | | |
|--------------------|---------------|---------|---------------|-----------|
| Peer Relationship | Below Average | Average | Above Average | Excellent |
| Spiritual Maturity | Below Average | Average | Above Average | Excellent |
| Social Readiness | Below Average | Average | Above Average | Excellent |

Based on the above information, I _____ strongly recommend
 _____ recommend
 _____ do not recommend this applicant for admission to IBC.

Signature: _____ Date: _____

Once you have completed this recommendation, please mail to:

City Church
 IBC Registration Office 13123 I-
 10 Service Rd.
 New Orleans, LA 70128