

EU EVANGEL UNIVERSITY

BOLDLY CHRISTIAN | UNQUESTIONABLY ACADEMIC

Applicant's Name: _____

By requesting this reference, the applicant (named above) waives their right to access the information presented on this form. No information provided will be shared with the applicant without consent of the individual (named below) completing this form.

To the Reference: In order to determine this applicant's eligibility for admission, Evangel University requests your evaluation of their spiritual life and character. Please complete and sign this sheet and return it to Evangel University. If the applicant is related to you, please have another member of the pastoral staff or leadership team complete this reference form. If you wish to speak to an admissions counselor about this applicant, please call 1-800-EVANGEL. Thank you.

Name of Reference:	Church Name:
Position in Church:	Church Street Address, City, State and Zip Code:
Phone Number:	Church Phone:

1. How long have you known the applicant? _____

2. How well do you know the applicant?
 VERY WELL WELL CASUALLY

3. Does the applicant currently attend your church?
 YES NO
 If no, please explain why:

If yes, how long has the applicant attended?
 UNDER 3 MONTHS 3-6 MONTHS 6 MONTHS TO YEAR 1+ YEARS

4. To the best of your knowledge, has the applicant made a personal commitment to Jesus Christ?
 YES NO UNSURE
 If no or unsure, please comment:

5. To the best of your knowledge, is the applicant currently living a Christian life?
 YES NO UNSURE
 If no or unsure, please comment:

6. In which activities does the applicant participate?
 YOUTH GROUP SUNDAY SCHOOL MUSIC/DRAMA LEADERSHIP OTHER
 If other, please specify:

7. Please describe the applicant's character including the following areas:

- Emotional stability:** Exceptional Good Average Below Average Unable to Assess
Spiritual life: Exceptional Good Average Below Average Unable to Assess
Integrity: Exceptional Good Average Below Average Unable to Assess
Maturity: Exceptional Good Average Below Average Unable to Assess
Concern for others: Exceptional Good Average Below Average Unable to Assess

Other character issues:

8. How would you describe the applicant's ability to succeed socially and academically in college?

9. To the best of your knowledge, has the applicant used alcohol, illegal drugs, tobacco or been involved in immoral sexual activity within the last twelve months?

- YES NO

If yes, please explain:

10. Additional Comments:

11. Your recommendation of this applicant to Evangel University:

- STRONGLY RECOMMEND RECOMMEND RECOMMEND WITH RESERVATION DO NOT RECOMMEND

No applicant can be considered for admission until his or her Pastoral Reference is returned to the Office of Admissions. We appreciate the prompt attention and honesty you have given to this evaluation. Thank you!

<p>SIGNATURE OF REFERENCE</p> <hr/>	<p>DATE</p> <hr/>
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Please return this reference to Evangel University using the contact information below.

Email: Admissions@evangel.edu

Fax: **417-575-5474**

Address: **Evangel University
Office of Admissions
1111 North Glenstone Avenue
Springfield, MO 65802**