



5209 Mississippi Bar Drive
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Recommendation for Credentialing Form

NAME OF APPLICANT: _____ Date: _____

RECOMMENDED BY: _____
(person filling out this form)

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

RELATIONSHIP TO APPLICANT: _____

LEVEL RECOMMENDED REQUESTED BY APPLICANT (circle one):

Licensed Minister Ordained Minister

HOW LONG HAVE YOU KNOWN THE APPLICANT? _____

IN WHAT CAPACITY HAVE YOU KNOWN THE INDIVIDUAL? _____

AS THE PERSON RECOMMENDING THIS INDIVIDUAL, WILL YOU BE WILLING TO
BE CONSIDERED AS A POTENTIAL MENTOR TO THIS PERSON? _____

Which characteristics best describe this applicant? Please check all that apply.

___ Warmhearted ___ Critical ___ Tolerant ___ Passive

___ Sympathetic ___ Rebellious ___ Respectful ___ Loving

___ Enthusiastic ___ Teachable ___ On Fire for Jesus

Please evaluate the applicant in regard to the following categories. Fill in one circle per line:

	Excellent	Above Average	Average	Below Average	Poor	No chance to observe
Response to authority	0	0	0	0	0	0
Reliability: dependability, responsibility	0	0	0	0	0	0
Maturity: personal development, ability to cope with life situations	0	0	0	0	0	0
Emotional Stability: reaction to stress, poise, mood stability	0	0	0	0	0	0
Motivation: genuineness, commitment	0	0	0	0	0	0
Judgment: ability to analyze a problem	0	0	0	0	0	0
Oral expression: clarity, coherence	0	0	0	0	0	0
Interpersonal relations: rapport, cooperation, attitude toward supervision	0	0	0	0	0	0
Empathy: sensitivity to the needs of others	0	0	0	0	0	0
Work habits: stamina, conscientiousness, perseverance, resourcefulness, initiative	0	0	0	0	0	0
Leadership: creative thought, curiosity, self-confidence	0	0	0	0	0	0
Personal appearance: cleanliness, grooming	0	0	0	0	0	0
Integrity: honesty, moral character	0	0	0	0	0	0
Christian commitment	0	0	0	0	0	0
Social adaptability	0	0	0	0	0	0
Cooperativeness	0	0	0	0	0	0
Mental ability	0	0	0	0	0	0
Physical health	0	0	0	0	0	0
Initiative	0	0	0	0	0	0
Christian character	0	0	0	0	0	0

Additional comments: _____

Signature

Please do not give back to the applicant, but return this form within two weeks to: theriversharon@gmail.com OR The River, 5209 Mississippi Bar Drive Orangevale, CA 95662