

Abuse Recovery Ministry & Services Church Staff Recommendation Form

The person giving you this form is applying for a leadership position in our ministry for women who have suffered domestic abuse. In order to maintain the integrity of the program and provide excellence to the women we serve, our prospective leaders are required to have a church staff member fill out this form. If you prefer, you can complete this form under "Forms" on our website at AbuseRecovery.org. Thank you for your time and assistance.

1. Your Name: _		Applicant's name:	Date:
2. Your Address	Your Address: Your Phone:		
	ve you known the app		
4. How well do you know the applicant? [] Very well [] fairly well [] casually [] not well5. Does the applicant attend church regularly [] Yes [] No			
7. Rank the app	olicant based on what	you have observed:	
1=poor 2=minim	nal 3=average 4=exc	ellent 5=outstanding	
Reliable	1 2 3 4 5	Servants heart	12345
Teachable	1 2 3 4 5	Ability to minister effectively	12345
Positive	12345	Listening ability	12345
Organized	1 2 3 4 5	Spiritually mature	12345
Truthfulness	12345	Communication skills	1 2 3 4 5
Thoughtful	1 2 3 4 5	Sensitive to the needs of oth	ers 1 2 3 4 5
8. Do you have	any concerns about	the applicant? [] No [] Yes, explain _	
9. Based on how	w well you know the a	applicant, in terms of ministry, would	you:
[] Strongly recor	mmended [] Recomm	ended [] Recommended with reserva	ations
[] Not recomme	nded		
10. If you are re	commending this app	olicant, please comment on why you	feel this person would make a
good leader			
Signature:		Print Name:	Date: