

# RHEMA BIBLE TRAINING COLLEGE

P.O. Box 50126 • TULSA, OK 74150-0126

Fax (918) 251-0685 • rbtc@rhema.org



## APPLICANT INFORMATION

Name \_\_\_\_\_ (If sent electronically, please mail the original copy to the above address.)

LAST	FIRST	MIDDLE
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Year Applying \_\_\_\_\_

<input type="checkbox"/> 1st year	<input type="checkbox"/> 2nd year	<input type="checkbox"/> 3rd year	<input type="checkbox"/> 4th year
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CURRENT PHONE NUMBER \_\_\_\_\_

**APPLICANT:** Present this form to someone who has known you for at least one year and is not related to you.

I understand that this confidential statement will be submitted to Rhema with the understanding that its contents will not be shared with me. I hereby waive my right to see the confidential statement submitted on this form.

**EVALUATOR:** Each applicant for admission to Rhema must submit three recommendations to complete his/her application. Serious consideration will be given to your comments. Please complete this form carefully and in privacy. Since we request a candid evaluation, we will hold comments in the strictest confidence. Therefore, we ask that this form be mailed directly to Rhema within two weeks of your receiving it.

Applicant's Signature \_\_\_\_\_ Date      /      /      mm / dd / yy

1. How long have you known the applicant? \_\_\_\_\_ year(s) \_\_\_\_\_ month(s)
2. Has your relationship been:    Very close    Close    Casual    Distant
3. What has been the nature of your acquaintance? Were you . . .
  - CHURCH:    Pastor                    Sunday School Teacher    Choir Director    Youth/Children's Pastor
  - Co-worker            Fellow member            Other \_\_\_\_\_
  - BUSINESS:  Employer            Supervisor            Co-worker            Other \_\_\_\_\_
  - SCHOOL:    Principal            Teacher            Fellow student    Other \_\_\_\_\_
  - SOCIAL:    Friend                Neighbor            Other \_\_\_\_\_

4. Please evaluate his/her personal character.

	Excellent	Good	Fair	Poor	Unknown
Honesty					
Financial responsibility					
Dependability					
Cooperativeness					
Academic ability					
Ability to work with others					
Ability to lead others					
Personal cleanliness					
Consideration for others					
Moral character					
Acceptance of instruction and/or discipline					

5. How industrious is he/she as a student or worker?
  - Usually conscientious, hard worker
  - Does about as much work as most other people
  - Very lazy
  - Works harder than most students/workers
  - Works less than most others
  - Have no basis for judgment

Comments \_\_\_\_\_

6. Please list attributes which best describe the applicant's attitude toward the church and its activities.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7. Is the applicant prompt in paying his/her bills?    Yes    No

Comments \_\_\_\_\_

8. From personal knowledge of this individual, would you:
- Highly recommend him/her as a qualified candidate for ministerial training.
  - Recommend him/her as a qualified candidate for ministerial training.
  - Recommend him/her with slight reservations as a candidate for ministerial training.
  - Hesitate in recommending him/her as a qualified candidate for ministerial training.
  - Be unable to honestly recommend him/her as a qualified candidate for ministerial training.

**If you checked any of the last three, please explain:** \_\_\_\_\_  
 \_\_\_\_\_

9. Emotional Evaluation:       Very Stable       Stable       Unstable       Very Unstable

10. Does the applicant respond well to authority?     Yes     No—Please explain further in question 18.

11. The applicant's spiritual influence on others is:       Positive       Neutral       Negative

12. With what sort of companions does he/she usually associate? \_\_\_\_\_  
 \_\_\_\_\_

13. Have you ever known the applicant to engage in questionable moral conduct?     Yes     No  
 If yes, please explain. \_\_\_\_\_  
 \_\_\_\_\_

14. Please describe the applicant's home life and/or marriage. \_\_\_\_\_  
 \_\_\_\_\_

15. Have you noted physical weaknesses, emotional problems, or learning difficulties that would hinder the applicant in an intense academic environment? \_\_\_\_\_  
 \_\_\_\_\_

16. To your knowledge, does the applicant:     Use tobacco products     Drink alcoholic beverages     Use illegal drugs  
 Comments: \_\_\_\_\_  
 \_\_\_\_\_

17. What do you consider the applicant's strong points? (Include positive personal traits.)  
 \_\_\_\_\_  
 \_\_\_\_\_

18. What do you consider the applicant's weak points? (Include negative personal traits.)  
 \_\_\_\_\_  
 \_\_\_\_\_

19. Please share with us any information you may have about the applicant that would help in our evaluation.  
 (This information could cover recent experiences or incidents in the applicant's life, or even a general personality appraisal.)  
 \_\_\_\_\_  
 \_\_\_\_\_

20. To your knowledge, has the applicant ever been accused of, questioned about, or investigated for child abuse, child neglect, or child molestation? If yes, please explain. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

21. To your knowledge, has the applicant ever been accused of, questioned about, or investigated for spousal abuse? If yes, please explain. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**PRINT**

Your Name \_\_\_\_\_ Your Age     18–25     26–35     36–50     51 & over  
 Your Phone Number (    ) \_\_\_\_\_ Are you a Rhema graduate? \_\_\_\_\_ Year \_\_\_\_\_  
 Address \_\_\_\_\_ Are you     Licensed?     Ordained?  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Organization \_\_\_\_\_  
 Position \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_