

Name of Applicant: \_\_\_\_\_  
(Please Print)

- Pastor  
 Christian Service  
 General

Ministry Location and Dates: \_\_\_\_\_ (Please Check appropriate box)

This applicant is pursuing a short-term missionary ministry with CrossWorld and has given your name as a reference. *CrossWorld* welcomes godly, missions-minded individuals to participate in what God is doing around the world through our missionaries and national partners. Your appraisal of the applicant is important and will assist us in helping him/her make the most of this opportunity. The applicant has released you from any liability concerning your responses, and your comments will be held in strictest confidence. If you would like to learn more about CrossWorld, contact the Mobilization office at 610-667-7660, or karen.holmes@crossworld.org or Lois Cunningham (Canada) at 905-238-0904 or lois.cunningham@crossworld.org, or visit us on the web at www.crossworld.org. Thank you for your help.

### General Questions:

1. How long have you known this person?
2. What is your relationship to this person?
3. What do you consider to be the applicant's two greatest strengths and weaknesses? Please explain.
4. Are you aware of any reasons this individual should not be considered for missionary service with CrossWorld? If yes, please explain.
5. Would you recommend this applicant?  
 Highly Recommend    Recommend    Neutral    Do Not Recommend

### Spiritual Life: (If you have no knowledge of #6-9, you may proceed to #10)

6. How does their life reflect someone who is living and growing in the Christian faith? (i.e. Bible knowledge, moral standards, spiritual growth, sound doctrine, etc.)
7. How does the applicant show a genuine concern for the life, salvation and spiritual growth of other people?
8. Have you talked to this person regarding a possible future in career missions?
9. What contribution has the applicant made to church ministry?

(OVER)

10. On a scale of 1 to 5, please rate the applicant on each of the following characteristics:

- 5 = Displays a **superior level** of skill, ability or competence
- 4 = Demonstrates an **above average level** of skill, ability or competence
- 3 = Displays an **acceptable or normal level** of skill, ability or competence
- 2 = Shows **less than average level** of skill, ability or competence
- 1 = Shows no or **extremely low level** of skill, ability or competence

<u>Characteristic</u>	<u>Rating</u>	<u>Comments (optional)</u>
<i>Ability To Work Well With Others</i>	5 4 3 2 1	_____
<i>Self Motivation/Initiative</i>	5 4 3 2 1	_____
<i>Self Discipline</i>	5 4 3 2 1	_____
<i>Dependability</i>	5 4 3 2 1	_____
<i>Positive Attitude</i>	5 4 3 2 1	_____
<i>Flexibility/Adaptability/Teachability</i>	5 4 3 2 1	_____
<i>Personal Appearance</i>	5 4 3 2 1	_____
<i>Goal Oriented</i>	5 4 3 2 1	_____
<i>People Oriented</i>	5 4 3 2 1	_____
<i>Common Sense</i>	5 4 3 2 1	_____
<i>Acceptance Of Authority</i>	5 4 3 2 1	_____
<i>Integrity/Honesty</i>	5 4 3 2 1	_____
<i>Effective Communication</i>	5 4 3 2 1	_____
<i>Leadership Ability</i>	5 4 3 2 1	_____
<i>Creativity</i>	5 4 3 2 1	_____
<i>Financial Management</i>	5 4 3 2 1	_____
<i>Quick Learner</i>	5 4 3 2 1	_____

**Additional comments:**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_

**Please return this completed Reference Form to the appropriate address below. Thanks again!**

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