



Pastor/Teacher

_____ (Applicant- Please Print your name here.)

I am applying for a position on next summer's MiVoden staff. Your honest appraisal will assist the directors in evaluating my qualifications and abilities. When you have completed this form, please mail it to the below address.

By signing I (applicant) choose NOT to review the information contained in this reference. Signature _____

GENERAL IMPRESSION <i>(Check what you believe to be applicable) 1=low, 6=high</i>	1	2	3	4	5	6	SPECIFIC QUALITIES <i>(Circle all qualities that you believe to be applicable)</i>
Spiritual influence	___	___	___	___	___	___	Christian influence positive, passive, or negative
Spiritual commitment	___	___	___	___	___	___	Dedicated, growing, searching, or uncommitted
Attitudes toward the church	___	___	___	___	___	___	Active support, passive acceptance, or resistance
Judgment	___	___	___	___	___	___	Mature, adequate, inconsistent, or poor
Dependability	___	___	___	___	___	___	Reliable, erratic, poor, often late, or easily distracted
Leadership potential	___	___	___	___	___	___	Natural, latent, or follower
Cooperation	___	___	___	___	___	___	Helpful, erratic, willingly obeys guidelines, poor, or obstructive
Initiative & Resourcefulness	___	___	___	___	___	___	Self-starter, creative, ability to improvise, needs supervision, persevering, easily discouraged
Intellect	___	___	___	___	___	___	Quick, average, or slow to grasp material
Personality	___	___	___	___	___	___	Extroverted, well-balanced, introverted, self-centered, unselfish, easily offended, self-confident, or accepts criticism
Adaptability	___	___	___	___	___	___	Flexible, open-minded, prejudiced, rigid, tactful, or out-spoken
Appearance	___	___	___	___	___	___	Well groomed, relatively neat, careless, or slovenly
Emotional stability	___	___	___	___	___	___	Self-controlled, stable, easily disturbed, or unstable

Please give any further information which you feel would be helpful to the directors in appraising this applicant. _____

How long have you known the applicant? _____ In what capacity? _____

Would you feel comfortable with this applicant caring for your child in a camp setting?

	Yes	No
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Reference's Signature: _____

Reference's contact information (**please print**):

Name: _____	Date: _____
Address: _____	Position: _____
_____	Phone #: _____

Please mail completed form to MiVoden / PO Box 19039 / Spokane WA 99219
If you would like to contact us personally, please call (509) 838-2761