

CAPITAL CHURCH ESWATINI APPLICATION FORM, PAGE 1 of 4

 **SPRITUAL REFERENCE FORM**

**APPLICANT INFORMATION**

*Information to be completed by applicant:*

Trip dates: \_\_\_\_\_

Name of applicant: \_\_\_\_\_

Name of spiritual reference: \_\_\_\_\_

Reference contact information: \_\_\_\_\_

Reference phone: \_\_\_\_\_

**SPIRITUAL REFERENCE INFORMATION**

*Questions to be completed by spiritual reference (church leader, small group leader, pastor, etc.):*

Keep confidential: Please place this form in a sealed envelope to ensure confidentiality. Return to the applicant or mail to the Capital Church office as soon as possible (**1010 East 700 South, Salt Lake City, Utah 84102**).

What is your relation to the applicant? \_\_\_\_\_

How long and well have you known the applicant? \_\_\_\_\_

How does the applicant get along and work with others? \_\_\_\_\_

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 **SPRITUAL REFERENCE FORM**

How has the applicant demonstrated leadership ability? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

What are the applicant's strengths? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

What challenges do you expect the applicant would face in this experience? How do you suggest we could best support the applicant?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever had occasion to question the applicant's morals, honesty, etc.?  Yes  No

Please comment: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

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How do you feel the applicant will respond in a cross cultural setting? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

How does the applicant react in stressful situations? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Has the applicant ever shown signs of rebellion?  Yes  No

Please comment: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

What are some evidences of the applicant growing in his/her walk with God?

\_\_\_\_\_  
\_\_\_\_\_

What attitude has the applicant demonstrated toward evangelism and relief opportunities?

\_\_\_\_\_  
\_\_\_\_\_

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 **SPRITUAL REFERENCE FORM**

Do you feel the applicant is suited to participate in an international mission?  Yes  No

Please comment: \_\_\_\_\_

\_\_\_\_\_

I recommend the applicant:  Without hesitation  With reservation  I do not recommend

Any additional comments:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I declare by my signature below that the above statements are true to the best of my knowledge.

\_\_\_\_\_  
PRINT FULL NAME

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

