

8.11 MINISTERIAL ENDORSEMENT FORM

MINISTERIAL ENDORSEMENT

Applicant Information: (Please print clearly or type.)

Applicant's Name: _____

Applicant's Address: _____

City _____ State: _____ Zip: _____

Fill out the above portion and then give this form to your pastor, former pastor, or major professor (if in college or seminary). The minister who completes the remainder of this form is not to return it to you but should mail it directly to the chairperson of the Credentials Committee.

Endorser's Information: (Please print clearly or type.)

Endorser's Name: _____

Endorser's Address: _____

City: _____ State/Province: _____ Zip: _____

Phone: _____ Current Position: _____

How long have you known the applicant: _____

In what relationship? _____

What is this applicant's greatest strength?

What area does this applicant most need to strengthen?

Please indicate (circle) your assessment of the applicant in the following areas (1 being high; 5 being low),

Qualities	1	2	3	4	5	Comments
Honest/Integrity	1	2	3	4	5	
Self-motivated	1	2	3	4	5	
Friendly	1	2	3	4	5	
Cooperative	1	2	3	4	5	
Teachable	1	2	3	4	5	
Works well with others	1	2	3	4	5	
Responsible	1	2	3	4	5	
Respected by others	1	2	3	4	5	
High moral standards	1	2	3	4	5	

According to the *Credentials Manual*, what kind of credentials does the candidate need for the type and level of ministry being performed (check one only in the left column below)?

- _____ Ordination
- _____ License only
- _____ Commission

What recommendation do you give for the granting of such a credential?

- _____ Strongly
- _____ With Reservation
- _____ Not at all

Additional Comments:

Endorser's Printed Name: _____

Signature: _____

Date Signed: _____

Do not return this form to the candidate, but return it to the following: