

CHURCH EXTENSION REFERENCE FORM

FROM: (Name and address of person supplying reference)	DATE CONFIDENTIAL REFERENCE ON
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The person named above has given your name as a reference. We would appreciate your filling out this form, giving us your frank appraisal of this person. Your reply will be held in strict confidence. If your information is insufficient for response, simply indicate this on the form and return it. Thank you for your assistance.

PLEASE RETURN FORM TO: **Bevan McWhirter, Missions Team Leader**
Northwest Baptist Convention
3200 NE 109th Ave
Vancouver WA 98682

Fax: 360-882-2213; Phone: 360-882-2113; Email: bevanm@nwbaptist.org

A. PERSONAL CHARACTERISTICS: PLEASE MARK (X) THE APPROPRIATE BOX. ANSWER TO THE BEST OF YOUR KNOWLEDGE. LEAVE BLANK IF YOU CANNOT ANSWER.	ALWAYS	MOST OF THE TIME	USUALLY	ONCE IN A WHILE	NEVER
DEMONSTRATES LEADERSHIP ABILITY					
EVIDENCES A SENSE OF DIVINE "CALL;" LIVES RESPONSIBLY					
SUPPORT OF THE LIFE AND MINISTRY OF HIS CHURCH AND THE SOUTHERN BAPTIST CONVENTION					
HANDLES PERSONAL FINANCES RESPONSIBLY					
POSSESSES MORAL INTEGRITY; GIVES EVIDENCE OF HIGH MORAL AND ETHICAL CONDUCT					
COOPERATES WITH HIS ASSOCIATION AND STATE CONVENTION					
HAS VIBRANT FAITH; SHARES WARMLY AND NATURALLY WITH OTHERS					
HAS STABLE AND CONSISTENT CONVICTIONS; NOT EASILY SWAYED BY RELIGIOUS FADS					
TEACHING AND ACTION AGREE; PRACTICES WHAT HE PREACHES					

B. HOW DO YOU RATE THE CANDIDATE'S POTENTIAL IN MISSION SERVICE?
 SUPERIOR ABOVE AVERAGE AVERAGE BELOW AVERAGE SHOULD BE DISCOURAGED

C. WOULD YOU WANT THIS PERSON AS A PASTOR? <input type="checkbox"/> YES <input type="checkbox"/> NO	D. HOW LONG HAVE YOU KNOWN THIS CANDIDATE? (FROM _____ TO _____)
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WHAT IS (WAS) YOUR RELATIONSHIP TO THIS CANDIDATE (PASTOR, CO-WORKER, ETC.)

E. IF POSSIBLE, LIST OTHER PERSONS QUALIFIED TO GIVE A SOUND APPRAISAL OF THE CANDIDATE:

NAME	ADDRESS, CITY, STATE, ZIP, PHONE

F. SUMMARY PARAGRAPH: PLEASE STATE FRANKLY YOUR OPINION OF THE CANDIDATE'S ALL-ROUND FITNESS FOR CHRISTIAN SERVICE BY STATING STRENGTHS, WEAKNESSES AND DIFFICULTIES IN THE CANDIDATE. **PLEASE USE REVERS SIDE.**

SIGNATURE	DATE
POSITION	TELEPHONE NUMBER ()