



First Evangelical Church Association  
羅省基督教會聯會

Tel: (323) 727-7077

Fax: (323) 727-7977

2617 W. Beverly Blvd.,  
Montebello, CA 90640, USA

E-mail: office@feca.org

Website: www.feca.org

## APPLICATION FOR FINANCIAL AID TO SEMINARIANS

### Pastoral Recommendation Form

#### **INSTRUCTION FOR THE APPLICANT**

Please fill in the information required in the top section of this form and forward to your recommender.

Applicant's name : \_\_\_\_\_

In accordance with federal regulations, materials in an applicant's file, such as recommendation forms, are open to inspection upon request, unless the applicant has waived the right of access in advance. Please indicate your wish by completing and signing the statement below. Your right to review this form is considered waived if you do not circle a response.

I (circle one)      DO              DO NOT              waive access to this recommendation.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### **INSTRUCTION FOR THE RECOMMENDER**

Please complete and return this form to the applicant in a **sealed envelope with your signature across the seal.**

#### **Recommender's information:**

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

Position / title: \_\_\_\_\_

Organization: \_\_\_\_\_

Daytime Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Address: \_\_\_\_\_

*Please complete the following questions in the space provided or in a separate sheet of paper.*

1. How long have you known the applicant and under what circumstances?
  
2. Are you clear about the applicant's call to full-time ministry? Please explain how you come to this conviction. (Having a clear sense of call is crucial. Without it, one should not enter into full-time ministry hastily. If we are not sure about someone's call to full-time ministry, but endorse his/her decision to move ahead in that direction, we are really hurting rather than helping him/her.) Please comment also on the applicant's qualities and potential to be fruitful in full-time ministry.
  
3. In your interaction with the applicant, what do you think his/her most outstanding gifts or characteristics are?
  
4. Where do you think the applicant's weaknesses lie?
  
5. Please comment, as much as you are able, on the applicant's character in the following areas: honesty, loyalty, faithfulness, integrity, attitude towards and relationship with others, financial stewardship.
  
6. What areas of personal or spiritual growth and development might you suggest for the applicant?
  
7. Please check as appropriate:
 

I recommend this applicant strongly	<input type="checkbox"/>
I recommend this applicant	<input type="checkbox"/>
I recommend this applicant, but with reservation	<input type="checkbox"/>
I do not recommend this applicant	<input type="checkbox"/>

Recommender's Signature: \_\_\_\_\_

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

*Thank you for taking the time to complete this recommendation form. We are deeply grateful for your help.*