

# Victorious Living Bible Institute

## Pastor's Recommendation:

Name of Applicant \_\_\_\_\_

Last

First

Address \_\_\_\_\_

Street and Number

City

Country \_\_\_\_\_ Telephone Number (\_\_\_\_\_) \_\_\_\_\_

I understand that this confidential statement is being submitted directly to the Admissions Office with the understanding that its contents will not be revealed to me. I hereby waive my right to see the confidential statement submitted on this form. At no time will the applicant see the completed form.

\_\_\_\_\_  
Signature:

## To the Pastor

Each applicant must submit one pastor's recommendation. Serious consideration will be given to your comments; therefore we ask that you complete the form carefully. It should be returned directly to the Admissions Office of your VLBI Campus. Send or email is preferred. Our details are as follows:

Since we request a candid evaluation, we will hold your comments in the strictest confidence.

1. How long have you known the applicant? \_\_\_\_\_

2. How well do you know the applicant? (Circle one)

By name	slightly or fairly well	numerous personal contacts
Casual	few personal contacts	very close pastoral relationship

3. Please indicate applicant's level of involvement in church activities. (Circle one)

Attends irregularly	little interest	willing to help
Regular attendance	little participation	enthusiastic and deeply involved

4. What do you consider the applicant's strong points? (Include positive personal traits)

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

5. What do you consider the applicant's strong/weak points? (Include positive/negative personal traits)

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

6. How do you rate this person in the following areas?

P.O. Box 2651  
Waycross, Georgia 31501  
[admissions@victoriouslbi.org](mailto:admissions@victoriouslbi.org)  
[www.victoriouslbi.org](http://www.victoriouslbi.org)

**Excellent      Above Average      Average      Below Average      No chance to observe**

Leadership					
Responsibility					
Christian Commitment					
Initiative					
Cooperation					
Personal Appearance					
Moral Character					
Health					
Social adaptability					
Integrity and honesty					
Emotional stability					

7. Do you believe the applicant is called into the full time ministry? \_\_\_\_\_

\_\_\_\_\_

8. Please share any information you may have about the applicant that would help in our evaluation. This information could cover recent experiences or incidents in the applicant's life, or even a general personality appraisal.

\_\_\_\_\_

\_\_\_\_\_

9. Please check the terms which best describe the applicant's attitude toward the church and its activities.

- Warm-hearted     
  Enthusiastic     
  Loving     
  Respectful  
 Critical     
  Tolerant     
  Passive     
  Contemptuous

**Pastors Information**

Pastor's Name \_\_\_\_\_

Name of Church \_\_\_\_\_

Address and telephone number \_\_\_\_\_

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