

Harvest Bible Institute

Pastoral Reference

APPLICANT (PLEASE PROVIDE THE FOLLOWING INFORMATION)

Full Name _____

Permanent Address _____

City _____ State _____ Zip _____

Phone _____ E-mail _____

AUTHORIZATION & CONFIDENTIALITY WAIVER

I hereby authorize the release of the following information to be considered in connection with my application for admission to Harvest Bible Institute. I understand and agree that the information disclosed by my Pastor will be held in confidence by the college and will not be released to me or anyone else. I consent to my Pastor's disclosure of information concerning me in response to this questionnaire and understand that my Pastor will mail this questionnaire directly to Harvest Bible Institute.

Applicant's Signature _____ Date _____

PASTOR (PLEASE PROVIDE THE FOLLOWING INFORMATION)

Dear Pastor:

Harvest Bible Institute is committed to working with pastors to ensure that students who attend HBI maintain their connection to their home church. The person named above is applying for admission to Harvest Bible Institute. Your evaluation is essential and will be held in confidence by our staff. **In the interest of confidentiality, please return this form directly to the admissions office.** This student's application will not be approved without our receipt of this completed Pastoral Reference form.

1. How long has this applicant attended your church? _____

2. How would you describe your relationship with this individual?
Close Casual Distant Other _____

3. In what areas has the applicant been involved with your church?
Youth Group Choir Teacher Usher
Prayer Ministry Children's Ministry Other _____

4. How would you describe the applicant's spiritual influence on others?
Positive Negative Neutral

5. What do you consider the applicant's strong points, abilities, or talents that could be enhanced at Harvest Bible Institute? _____

PASTOR CONTINUED (PLEASE PROVIDE THE FOLLOWING INFORMATION)

6. What do you consider the applicant's weak points?

7. Please evaluate the applicant's character, abilities, and qualifications by checking the box that best represents this applicant.

	Excellent	Above Average	Average	Poor	Did Not Observe
Attitude					
Maturity					
Motivation					
Responsibility					
Appearance					
Cleanliness					
Leadership Ability					
Respect for Authority					
Financial Responsibility					

8. Please share any additional information that you feel may be relevant to us in evaluating this applicant for admission to Harvest Bible Institute. _____

9. How do you recommend this applicant for admission to HBI? (Check only one)

With Enthusiasm
 Delay Acceptance

With Confidence
 Deny Acceptance

With Reservation
 Other _____

PASTOR'S CONTACT INFORMATION

Pastor's Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Church Phone _____

E-mail _____

Pastor's Signature _____ Date _____

**PLEASE MAIL THIS FORM TO:
 HARVEST BIBLE INSTITUTE ADMISSIONS
 P.O. BOX 2391
 FAYETTEVILLE NC 28302**