* **YWAM DISCIPLESHIP TRAINING COURSE (DTC)**

**PASTOR / SPIRITUAL LEADER / MENTOR’S REFERENCE FORM**

**APPLICANT: Please provide the following information and give it to your pastor or spiritual leader/mentor to complete.**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Applicant Name: | | |  | | | |  | | | |
| **Referee Details:** | | |  | | | |  | | | |
| Full Name: | |  | |  | | | |  | Date: |  |
|  | | | |  | | | |  | | |
| Address: | |  | | | | | | | | |
|  | | | | | | | |  | | |
| Phone: |  | | | | Position/Church: |  | | | | |

*The above applicant has applied to the YWAM DTC, a part-time version of the traditional Discipleship Training School (DTS) program offered by Youth With A Mission (YWAM). YWAM is an international, interdenominational movement of Christians dedicated to presenting Jesus Christ to this generation, to mobilizing**as many as possible to help in this task and to the training and equipping of believers for their part in fulfilling the Great Commission.*

*Serious consideration will be given to your comments; therefore we ask that you complete this form carefully. Your prompt attention in completing this form is appreciated. Thank you for your assistance. Please check the following and comment if needed. Feel free to contact us with any questions, and email the completed reference form to* [*contact.ywamdtc@gmail.com*](mailto:contact@ywamdtc.org)*.*

How long have you known the applicant?

How well do you know the applicant (1 being very little, 5 being intimately)?  1  2  3  4  5

How would you rate the applicant in the following categories?

Initiative:  Superior  Above Average  Average  Needs Improvement  Do Not Know

Concern for others:  Superior  Above Average  Average  Needs Improvement  Do Not Know

Response to Authority:  Superior  Above Average  Average  Needs Improvement  Do Not Know

Ability to follow:  Superior  Above Average  Average  Needs Improvement  Do Not Know

Leadership:  Superior  Above Average  Average  Needs Improvement  Do Not Know

Judgment/decision-making:  Superior  Above Average  Average  Needs Improvement  Do Not Know

Emotional stability:  Superior  Above Average  Average  Needs Improvement  Do Not Know

Comments:

Mental ability:  Superior  Above Average  Average  Needs Improvement  Do Not Know

Reliability:  Superior  Above Average  Average  Needs Improvement  Do Not Know

Cooperativeness:  Superior  Above Average  Average  Needs Improvement  Do Not Know

Flexibility:  Superior  Above Average  Average  Needs Improvement  Do Not Know

Christian character:  Superior  Above Average  Average  Needs Improvement  Do Not Know

Punctuality:  Superior  Above Average  Average  Needs Improvement  Do Not Know

Time Management:  Superior  Above Average  Average  Needs Improvement  Do Not Know

Financial Responsibility:  Superior  Above Average  Average  Needs Improvement  Do Not Know

Comments:

1. Please comment to what extent the applicant is active in church work or Christian service (e.g., dedicated, average, casual, etc.).
2. In your consideration, which of the following would describe the applicant’s Christian experience?

Mature  Contagious  Genuine and growing  Over-emotional  Superficial

Comments

1. In your opinion, which of the following areas of ministry is the applicant gifted? Please check all that apply.

Communications  Pastoring  Teaching  Encourager

Art  Evangelism  Discipleship  Hospitality

Drama  Prayer  Youth Ministries  Administration

Music  Counseling  Children’s Work  Servant-Hearted

Worship  Preaching  Medical  Other:

1. Overall, what do you consider to be the applicant’s strengths and weaknesses?
2. What could the YWAM DTC do to aid in the applicant’s personal development?
3. Please comment on anything relevant that we should be aware of, if known (i.e., medical, psychological, drug or alcohol-related, family background, or other life situations):
4. Would you recommend the applicant for acceptance into the YWAM DTC?  Yes  No  Yes with reservations

Comments:

|  |  |  |  |
| --- | --- | --- | --- |
| ***I certify that the information provided is complete and accurate according to my knowledge of the applicant.*** | | | |
| Signature: |  | Date: |  |