

COME ALIVE WORLD INC. CONFIDENTIAL PASTORAL REFERENCE

Applicant Name: _____ **Trip Date:** _____

CHURCH INFORMATION		
Church Name:	Pastor's Name:	
Church Address:	State:	Zip Code:
Church Telephone:	Church Website:	

To Be Completed by the Pastor/Youth Pastor

Please fill out this recommendation to assist Come Alive World in the acceptance of the Applicant on a short-term mission trip. Your evaluation is very important and will be held in strict confidence.

Please answer the following to the best of your knowledge.

- 1. Does the applicant have a personal relationship with Jesus? Yes No
- 2. Has the applicant had a growing relationship with the Lord over the last 6 months? Yes No
- 3. Is the applicant willing to submit to authority? Yes No
- 4. Do you feel the applicant will have a positive influence on the entire team? Yes No

Please note if you have any concerns about the applicant's life style:

Please feel free to add any additional comments:

Would you recommend the Applicant for acceptance on a short-term trip with Come Alive World?

- Strongly recommend
- Recommend
- Recommend with slight hesitation
- Strongly not recommend

Pastor's Signature

Date

Title