



Pastor's Reference

To be completed by the applicant: Please fill out the below and ask your Pastor to complete this form and supply him/her with a stamped envelope addressed to Admission Office at Alaska Bible College (our address is on the back of this form).

Name of applicant _____ has applied for admission to
Address _____ Alaska Bible College for the
City _____ State _____ Zip _____ Fall Spring 20____
Authorization for waiver: I, the undersigned, hereby voluntarily waive my right to review this reference report.
Signature _____ Date _____

To be completed by the Pastor:

All applicants to Alaska Bible College are required to submit a Pastor's recommendation. The applicant's papers cannot be processed until this form has been completed and returned; therefore, we request an early reply. (Please feel free to use a separate piece of paper if necessary.)

1. How long have you known the applicant? _____ In what capacity? _____
2. Do you know him/her as an earnest, well-balanced Christian? _____ If no, please explain _____

3. Are you aware of any serious emotional problems? _____ If yes, please explain _____

4. Has (s)he any outstanding abilities? _____

5. What do you consider his/her chief weakness? _____
6. How often does (s)he attend church? _____ Please list church activities _____

7. To your knowledge, does (s)he hold any unusual doctrinal views? _____ If so, please explain _____

8. What can you say about the spiritual tone of his/her home? _____

9. To your knowledge, does (s)he use tobacco, alcoholic beverages, or illegal drugs? _____ If yes, to what extent?

10. Have you ever had occasion to question his/her morals? _____ If so, please explain _____

11. Has (s)he ever been disciplined or dropped from any school?_____ If so, please explain_____

12. Please describe what spiritual growth you have seen in his/her life:_____

Please complete the following:

	Outstanding	Above Average	Average	Fair	Unsatisfactory
1. Attitude toward authority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Emotional stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Social acceptability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Concern for others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Spiritual Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please indicate your recommendation regarding this applicant:

Endorse Endorse with reservations Do not endorse

Signature _____ Print Name _____

Address _____
Street City State Zip

Phone _____ Date _____

If you would like to receive further information about Alaska Bible College please indicate below:

Catalog Brochures General Newsletters All

Please give the name, address and phone # of another person who could give a reference for this applicant.

Name _____ Phone _____

Address _____
Street City State Zip

Mail to: The Admissions Office of Alaska Bible College
PO Box 289 · Glennallen, AK · 99588
1-800-478-7884 · info@akbible.edu · www.akbible.edu