

SCHOOL OF EVANGELISM IN NORTH TEXAS (SENT)

Student Recommendation Form

mail to: SENT Director, P.O. Box 800 Alvarado TX 76009

(Name) _____ has applied to School of Evangelism in North Texas (SENT).

1. Name of person filling out form (Please, no family members):

2. What is your relationship with the applicant?

3. May we contact you concerning this person's reference form? Yes ___ No ___

4. Phone Number: ___ - ___ - ___

5. How long have you known the applicant? _____

6. Please tell us why you feel that the SENT program will be a blessing to this applicant:

In your honest opinion, how would you rate this person in the following areas: (Please circle one, with 10 being highest, 1 being lowest.)

	10	9	8	7	6	5	4	3	2	1		Please add your comments:
Leader											Follower	_____
Spirituality												_____
Commitment												_____
Motivation												_____
Stable												_____
Integrity												_____
Dependable												_____
Attitude												_____
Good Health												_____
Devotion												_____

How long have you known this person? _____

Would you recommend him/her? Yes ___ No ___

Please add any additional comments (use back of the sheet if necessary): _____

Thank you for filling out this recommendation form. If you have any questions or additional comments, please don't hesitate to call us!

Name: _____

Date: _____

Signature: _____

Position: _____

Address: _____

Telephone: _____