

**This section to be completed by applicant**

Name of Applicant: \_\_\_\_\_

Course applied for: \_\_\_\_\_

Commencing study in year 20\_\_

Details of Referee:

Name \_\_\_\_\_

Street/PO Box \_\_\_\_\_

Suburb \_\_\_\_\_ Postcode \_\_\_\_\_

Daytime phone \_\_\_\_\_ Mobile \_\_\_\_\_

Occupation \_\_\_\_\_ Church Attending \_\_\_\_\_

**This section to be completed by referee**

*The above person is applying to Moore College to train for gospel ministry. The College would appreciate your comments about the applicant. Please include both demonstrated strengths and weaknesses.*

I have known the applicant since (year) \_\_\_\_\_ Capacity \_\_\_\_\_

**Personal Life** (eg, godliness, commitment to ministry, knowledge of Bible, prayer, family)

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**Relational Skills** (eg, ability to relate to all ages and the opposite sex, sympathy, compassion)

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**Leadership Ability** (eg, ability to gather, unite and direct a group, handling conflict/ opposition, delegation)

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**Gifts for Ministry** (eg teaching, preaching, leading church meetings, evangelising, caring for others, pastoring, organisational skills)

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**Any limitations, reservations or areas of improvement**

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Do you have any reservations about recommending this applicant

(a) for theological study? \_\_\_\_\_

(b) for ordination (if applicable)? \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Confidential:** The contents of this form are to be kept Confidential by the Referee and the College.

**POST**

The Applications Administrator  
Moore College  
1 King Street  
NEWTOWN NSW 2042

**EMAIL**

registrar@moore.edu.au