



LIVING WATERS INSTITUTE OF THEOLOGY

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Office of Admission

E-Mail: princempunalur@yahoo.co.in

Affiliated to Living Waters Elim Church UK

In Association with Martin Luther Christian University (U.G.C)

ECCLESIASTICAL/PASTORAL RECOMMENDATION FORM

TO THE APPLICANT

Please give this form to a pastor, elder, or deacon at your church who will provide an objective assessment of your character and abilities. First, enter your full name below and indicate your program for which you are applying .

Name:

Sex: Male / Female

Academic program for which you are

applying: B.Th.

M.Div.

TO THE RECOMMENDER

The above named person is applying to Living Waters Institute of Theology and has requested that your recommendation be included as part of the information on which our Admission Office will base its decision. Please provide your assistance by answering the questions below. When completed, Please mail this form directly to our Admission Office at the address shown above.

1. How long have you known the applicant and in what capacity?
2. What characteristics do you consider to be the strengths of the applicant?
3. Please describe the area(s) that you feel the applicant has room for growth?
4. How thoroughly do you think the applicant has thought out plans for theological study?

5. Living Waters Institute of Theology seeks applicants who demonstrate potential for Christian ministry and related professions. Please comment on the applicant's potential and commitment for a religious vocation.

6. What would you say are the applicant's gifts?

Please give us your appraisal of the applicant in terms of the qualities listed below:

ABILITIES AND TRAITS	Superior	Good	Average	Poor	Not Observed
Leadership Skills.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interpersonal Skills.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teachability.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Humility.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrity.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creativity.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Perseverance.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work in a team- environment.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to handle conflict.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work independently.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
English written communication skills..	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
English oral communication skills.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marital relationship.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Problem-solving ability.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Physical health.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental & emotional stability.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Do you recommend this applicant for Living Waters Institute of Theology ?
 Highly recommend Recommend Recommend with reservation Do not recommend

Name of Recommender.....

Position or Title.....

School, Church, or Company.....

Address.....

City/State/Pin..... Mob:.....

Signature of recommender.....

Date:.....