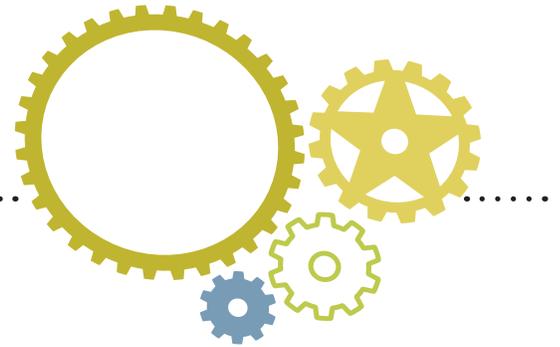


# Request for References

## FOR PROFESSIONAL, UNDERGRADUATE, AND PARAPROFESSIONAL CERTIFICATION

in The United Methodist Church



.....  
\_\_\_\_\_ has applied for

- Professional       Undergraduate       Paraprofessional

Certification in \_\_\_\_\_ in The United Methodist Church.  
(list areas)

Your name has been given as a reference. Please assist the committee by providing the following information and send to:

BOM Representative: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

email: \_\_\_\_\_

**Please note:**

- The applicant has waived the right to see this evaluation. Your responses will be held in strict confidence by the review committee.
- The applicant has not waived their rights to see this evaluation. Responses may be shared with the applicant during the process of application review with the committee, or if requested by the applicant.

*(Please type or use black ink so that copies can be reproduced for the conference Board of Ordained Ministry)*

**1. INFORMATION ABOUT THE PERSON COMPLETING THIS FORM:**

Your name \_\_\_\_\_

Your position in church/agency \_\_\_\_\_

**2. HOW LONG AND UNDER WHAT CIRCUMSTANCES HAVE YOU KNOWN THE APPLICANT?** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**3. WHAT DO YOU SEE AS THE APPLICANT'S MAJOR STRENGTHS?** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**4. WHAT DO YOU THINK ARE HIS/HER AREAS OF NEED FOR FURTHER PROFESSIONAL GROWTH?** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Request for References**

**PROFESSIONAL/UNDERGRADUATE/PARAPROFESSIONAL CERTIFICATION**

in The United Methodist Church



**5. HOW WOULD YOU RATE THE APPLICANT ON THE FOLLOWING POINTS?** Check the column which best describes the applicant, and share a brief comment, elaborating on the applicant’s ability in any or all areas.

|   | BELOW AVERAGE         | AVERAGE               | ABOVE AVERAGE         | OUTSTANDING           |
|---|-----------------------|-----------------------|-----------------------|-----------------------|
| Ability to perceive and handle theological and educational concepts | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Competence in a wide range of leadership skills                     | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Ability to work with people and to help them grow religiously       | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Ability to look at self objectively and set own professional goals  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Familiarity with United Methodist structure, tradition and polity   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Health and physical capacity for demands of the profession          | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Christian character and commitment to the church and its mission    | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Maturity in judgement, professional attitude, and demeanor          | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Maturity in emotions and capacity for handling stress               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Comments on the above areas:

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**6. DO YOU HAVE ADDITIONAL COMMENTS TO SHARE ABOUT THE APPLICANT WITH THE REVIEWING COMMITTEE OF THE CONFERENCE BOARD OF ORDAINED MINISTRY?**

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Please promptly mail or e-mail this form to the conference Board of Ordained Ministry Registrar named on the reverse side and notify the applicant that the form has been mailed. Thank you for taking the time to assist the applicant and for serving the church.