

# City Gate

## Pastoral Recommendation

<b>TO BE COMPLETED BY APPLICANT:</b>		
<b>Last Name:</b>	<b>First Name:</b>	
<b>Address:</b>		
<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Phone:</b>	<b>Email:</b>	
<i>To the applicant:</i>  By allowing your pastor/overseer to submit a character reference on you, you agree to waive the right to see this completed character reference. If you would like to know your pastor's/overseer's opinion of your character, we encourage you to discuss it with your pastor/overseer.  To encourage my pastor's/overseer's unhindered honesty, I agree to waive my right to see this character reference.  I am applying for the position of "Volunteer" at City Gate.		
_____		_____
<b>Applicant Signature</b>		<b>Date</b>

### *To the Pastor/Overseer:*

This application is to be completed by the applicant's primary pastor/overseer. If the applicant's parent is the pastor, an elder or other church leader may act as the pastoral reference. **Please return this form to City Gate, 218 North Duke Street, Lancaster, PA 17602.** If you have any questions you may email the administrator at [info@citygatelancaster.com](mailto:info@citygatelancaster.com). You may learn more about City Gate at [www.citygatelancaster.com](http://www.citygatelancaster.com).

Thank you for your involvement in this important phase in the applicant's life. Your honest opinions are carefully considered for the applicant's placement in City Gate. We recognize no one has a flawless history in God outside of Jesus Christ and that all of our applicant's have made mistakes in their journey. We are not looking for perfection. We are looking for character, patterns and habits. We will keep your responses confidential and encourage the applicant to talk with you if they have questions about your opinions of them. Your timely response is appreciated, as the applicant cannot serve until this application form is received. Thank you again for you time and honest assessment.

**TO BE COMPLETED BY THE PASTOR/OVERSEER**

**Name:**

**Position:**

**Church Name:**

**Address:**

**City:**

**State:**

**Zip:**

**Contact Number(s)**

**Email:**

1. How long have you know the applicant? \_\_\_\_\_
2. How well do you know the applicant? \_\_\_ very well \_\_\_ fairly well \_\_\_ casually \_\_\_ by name only
3. How long has he/she attended your congregation? \_\_\_\_\_
4. Does this applicants life express their Christian testimony? \_\_\_ Yes \_\_\_ No \_\_\_ Inconsistently
5. What are the strengths and spiritual gifts of the applicant according to your observation?  
\_\_\_\_\_  
\_\_\_\_\_
6. What is your assessment of weaknesses or struggles you have observed in the applicant?  
\_\_\_\_\_  
\_\_\_\_\_
7. Factoring in the applicant's character, spiritual gifts and knowledge of the Scriptures, rate (circle) their maturity on a scale of 1 to 10, 1 being worldly and 10 being Christ-like: 1 2 3 4 5 6 7 8 9 10
8. Describe the applicant's level of involvement in your congregation. What areas of ministry do they serve in? \_\_\_\_\_  
\_\_\_\_\_
9. Has the applicant ever been a source of dissension or disunity in the congregation? \_\_\_ yes \_\_\_ no
10. Has the applicant proven to be unreliable, dishonest, or of questionable character? \_\_\_ yes \_\_\_ no  
If yes, please explain. \_\_\_\_\_
11. Does the applicant possess leadership abilities? \_\_\_ yes \_\_\_ no
12. What is the applicant's effect on his/her peers? \_\_\_\_\_  
\_\_\_\_\_
13. If the applicant is married, how would you describe their relationship? \_\_\_\_\_  
\_\_\_\_\_
14. If the applicant has children, how would you describe their relationship with their children? \_\_\_\_\_  
\_\_\_\_\_
15. Please give any relevant details about the family background of the applicant. \_\_\_\_\_  
\_\_\_\_\_

16. Please try to assess the following based on your knowledge of the applicant:

	Uncertain	Weak	Fair	Good	Very Good	Outstanding
Spiritual Maturity						
Devotion to Christ						
Personal Integrity / Honesty						
Self-Discipline						
Willingness to Serve						
Teachability						
Flexibility						
Ability to Work with Others						
Family Life						
Communication Skills						
Leadership Skills						
Physical Health						
Emotional Stability						
Openness to Correction						
Attitude Towards Authority						

Comments on any of the above: \_\_\_\_\_

17. What would your level of recommendation for this applicant to serve at City Gate?

\_\_\_ Highly recommend \_\_\_ Recommend \_\_\_ Recommend with reservations\* \_\_\_ Do not recommend\*

\*Please explain any concerns: \_\_\_\_\_

18. Please give any other helpful comments or observations:

\_\_\_\_\_  
Pastor/Overseers Signature

\_\_\_\_\_  
Date