





# JAMAICA BAPTIST UNION MISSION AGENCY

## MISSION VOLUNTEER REFERRAL FORM

**CONFIDENTIAL REFERENCE FOR:** \_\_\_\_\_  
Surname Christian Name

***N.B. This form is to be completed and signed by the APPLICANT'S Pastor or Moderator, and is to be submitted directly to the JBU Office along with the completed application form. This questionnaire is designed to assess the applicant in the following areas:***

- ***Christian Commitment and***
- ***Church Involvement***
- ***Gifts and Abilities***
- ***Inter-Personal Skills***

### REFEREE INFO

Name of Referee: \_\_\_\_\_  Pastor  Moderator

Tel. Contact of Referee: \_\_\_\_\_ Email \_\_\_\_\_

### REFERENCE

**1. CHURCH INVOLVEMENT:** Please tick areas which apply:

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Preaching       | <input type="checkbox"/> Counseling                      | <input type="checkbox"/> Evangelism            |
| <input type="checkbox"/> Leading Worship | <input type="checkbox"/> Leading Bible Study             | <input type="checkbox"/> Attending Bible Study |
| <input type="checkbox"/> Mentoring       | <input type="checkbox"/> Participation in Holy Communion | <input type="checkbox"/> Teaching Ministry     |

Other (please state): \_\_\_\_\_

How long has the applicant been a Christian/member of your congregation? \_\_\_\_\_

How well do you know the applicant? [ ] Hardly [ ] Fairly well [ ] Very well

How available is the applicant, usually? [ ] Hardly [ ] Fairly [ ] Very

How dependable is the applicant? [ ] Hardly [ ] Fairly [ ] Very

**2. HEALTH:** Are there any known health issues of concern?

If yes, please state \_\_\_\_\_

**3. INTER-PERSONAL PROFILE:** Please tick ONLY those which apply to the applicant:

- |  |  |
|--|--|
| <input type="checkbox"/> Slow to make friends              | <input type="checkbox"/> Makes friends easily                    |
| <input type="checkbox"/> Avoids social relationships       | <input type="checkbox"/> Awkward in groups and social gathering  |
| <input type="checkbox"/> Well-mannered                     | <input type="checkbox"/> Socially adept                          |
| <input type="checkbox"/> Relates well with opposite sex    | <input type="checkbox"/> Insensitive and insecure w/opposite sex |
| <input type="checkbox"/> Overly critical of others         | <input type="checkbox"/> Sensitive to needs of others            |
| <input type="checkbox"/> Rebellious: likes to have own way | <input type="checkbox"/> Cooperative in most situations          |
| <input type="checkbox"/> Unable to communicate clearly     | <input type="checkbox"/> Clear, confident in communication       |

Loner       Reserved                       Outgoing     Overbearing

Other (please state): \_\_\_\_\_  
\_\_\_\_\_

**4. OTHER:**

(i) On a team of two to four persons, the applicant is most likely to be ...

a supportive team member                       the leader

(ii) When conflict arises, this person is most likely to respond with:

withdrawal/avoidance                       defensive/critical attitude  
 lack of cooperation                       confrontation  
 willingness to resolve conflict                       peacemaking

(iii) Please state any specific recommendation you may have to assist the further development of this applicant in character and ministry skills:

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

(iv) Other Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I declare that the information above, to the best of my knowledge, is accurate. I therefore write to recommend the above named applicant.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**T H A N K      Y O U**

**February 2019**