



Assemblies of God U.S. Missions MAPS
 1445 Boonville Ave. Springfield, MO 65802
 Phone: 1-877-346-6277 Fax: (417) 862-0409

PASTORAL REFERENCE

Please Print

APPLICANT'S NAME	
CURRENT ADDRESS	
PHONE NUMBER	

This reference is to help evaluate a person's ability to effectively serve as a RV Volunteer with the Assemblies of God missionary personnel through Mission America Placement Service (MAPS). MAPS assignments require a person to be mature, flexible, and able to handle challenges in ministry. Applicants should be of good physical, mental, emotional, and spiritual health.

This form should be filled out by the applicant's senior pastor. If you are related to the applicant, please pass this form on to one of your associates or youth pastors. It is important that you know this person well enough to make a good decision as to whether this applicant is suitable for this type of assignment. When completing this form we ask you to be candid and as detailed as possible. Your comments are deeply appreciated and will be held in strict confidence.

The MAPS office must receive this reference form before the applicant's file can be processed. Please complete both sides of the reference form and return in the provided envelope. Thank you for taking the time to help us with this process.

**Please mark each item with an X. (1=Excellent 2=Good 3=Average 4=Questionable)
 After each section please comment on any outstanding strengths or problems. PLEASE PRINT!**

How long have you known the applicant and under what circumstances? _____

PHYSICAL	1	2	3	4	?
1) Health					
2) Energy/stamina					
3) Hygiene and attire					
Comments:					

EMOTIONAL	1	2	3	4	?
1) Emotional stability					
2) Temperament					
3) Resistance to depression					
4) Reaction to new situations					
Comments:					

TEAM	1	2	3	4	?
1) Group loyalty					
2) Respect for authority					
3) Responsible					
4) Resourceful					
Comments:					

SOCIAL	1	2	3	4	?
1) Consideration of others					
2) Friendly					
3) Tact					
4) Family Relations					
5) Conduct with the opposite sex					
6) Conduct with the same sex					
7) Attitude toward other races					
8) Honesty					
Comments:					

INTELLECTUAL	1	2	3	4	?
1) Leadership ability					
2) Ability to complete tasks					
3) Self-discipline					
4) Study habits					
5) Clarity of speech					
6) Teachable					
Comments:					

SPIRITUAL	1	2	3	4	?
1) Spiritual maturity					
2) Consistency of testimony					
3) Devotional life					
4) Burden for souls					
5) Involvement in Christian service					
6) Church attendance					
Comments:					

Is there any reason why this applicant should not work with children or adults? Circle: **Y** or **N**
If yes, please explain on a separate sheet of paper and attach to this form.

How would you rate the applicant's ability to serve effectively in ministry?

Please circle: **1=Excellent 2= Good 3=Average 4=Questionable**

Frankly state your opinion of the applicant's fitness for Christian service and vocational potential. Please add any information or comments you feel could aid our screening committee in the processing of this applicant. Please write additional comments on a separate sheet of paper if more space is needed.

YOUR NAME:	DATE:
ADDRESS:	
PHONE NUMBER:	E-MAIL ADDRESS:
CHURCH NAME:	CHURCH AFFILIATION: