

**Bayshore Christian Ministries  
Summer Team 2002  
Reference Form**

**REFERENCE 1**

(To be completed by applicant's pastor, or a campus fellowship or Bible study leader)

*Applicant Waiver: I hereby agree to waive my rights to see this form once it has been completed.*

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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Reference Name: \_\_\_\_\_ Date: \_\_\_\_\_

Employer: \_\_\_\_\_ Title: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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**Dear Reference Provider:**

**This applicant has applied to volunteer with Bayshore Christian Ministries' summer academic enrichment programs for children and teens. Volunteers live and work closely with others in an urban environment that, while rewarding, can be challenging physically, emotionally and spiritually. Your honest and clear answers to the following questions will help us in choosing our team.**

**Please fill out the reference sheet and mail the completed, signed copy to: 1001 Beech Street, East Palo Alto, CA 94303. Thank you for your time!**

1. Please describe your relationship to the applicant. How long have you known him/her and in what capacity?

2. What three qualities best describe the applicant?

3. Are there any spiritual or emotional weaknesses that may affect the applicant's ability to participate successfully in an intensive ministry setting? Please explain.

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4. Do you have any reason to believe that the applicant could treat children or youth in an abusive way (emotionally, physically, or sexually)? If so, please explain.

5. The applicant would be working with children and youth from the inner city who have various ethnic backgrounds and frequently have had difficult life experiences. How comfortable do you think the applicant will be in working with and developing relationships with the children?

6. How comfortable and able do you think he/she would be in carrying out appropriate discipline?

7. How would you rate the applicant in the following areas?

	<b>High</b>	<b>Average</b>	<b>Low</b>
Cooperation with others	_____	_____	_____
Ability to form positive relationships with peers	_____	_____	_____
Submission to authority	_____	_____	_____
Leadership ability	_____	_____	_____
Reliability	_____	_____	_____
Spiritual maturity	_____	_____	_____
Emotional stability	_____	_____	_____

7) Please explain why you recommend or do not recommend the applicant for ministry in BCM.

8) Please add any additional comments.

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**REFERENCE 2**

(To be completed by a person *NOT* related to you)

*I hereby agree to waive my rights to see this form once it has been completed.*

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Reference Name: \_\_\_\_\_ Date: \_\_\_\_\_

Employer: \_\_\_\_\_ Title: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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Ability to form positive relationships with peers	_____	_____	_____
Submission to authority	_____	_____	_____
Leadership ability	_____	_____	_____
Reliability	_____	_____	_____
Spiritual maturity	_____	_____	_____
Emotional stability	_____	_____	_____

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