

CWC Leadership Candidate – Pastor’s Reference

Dear Pastor,

The individual below is being considered for leadership position with the Missouri CWC. The CWC State Connector Team would appreciate your thoughtful responses to this questionnaire. Please return this completed form to the team member who sent it at your earliest convenience. Thank you for your help!

Candidate’s Name _____

Pastor’s Name _____

Church Name _____ **City** _____

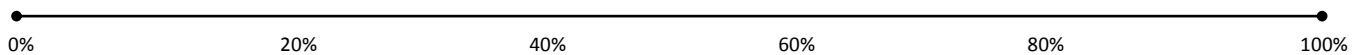
Phone (_____) _____ - _____ **E-Mail** _____

1. To your knowledge, is the candidate a committed follower of Christ? Yes No Uncertain

2. To your knowledge, how long has the candidate been a Christian? _____

3. How long has the candidate been a member of your church? _____

4. Considering all corporate ministry opportunities your church offers – weekly worship, Bible study, small groups, etc. – place an “X” on the percentage scale below that BEST describes the candidate’s average monthly attendance:



5. What ministry opportunities is the candidate involved with in your local church? (Check all that apply.)

- | | | |
|--|---|--|
| <input type="checkbox"/> Women’s Ministry | <input type="checkbox"/> Music / Worship Ministry | <input type="checkbox"/> Prayer Ministry |
| <input type="checkbox"/> Children’s Ministry | <input type="checkbox"/> Youth Ministry | <input type="checkbox"/> Senior Adult Ministry |
| <input type="checkbox"/> Outreach Ministry | <input type="checkbox"/> Hospitality Ministry | <input type="checkbox"/> Media Ministry |
| <input type="checkbox"/> Sunday School | <input type="checkbox"/> Small Group Ministry | <input type="checkbox"/> Other _____ |

6. Please indicate below whether you would recommend the candidate for leadership with the Missouri CWC or not.

- Strongly recommend Recommend Recommend with reservations I do NOT recommend

Comments?

Your Signature _____ **Date** _____