



Pastor's/Minister's Reference

Please ask your Pastor or Minister of Religion to fill in the following form.

Details

Your Name:

Title:

Church Name:

Address:

Email:

I have known _____ for _____ years.
(applicant name)

Current Attendance

Please select

Regular Irregular Seldom No affiliation

Current Involvement

Please select

Regular Irregular Seldom No affiliation

Please briefly describe the applicant's involvement:

Please tick one of the following

I fully support _____'s application and believe that he/she would be an asset to the College.
(applicant name)

I support the application with some reservations.

I am unable to support this application.

For confidential reasons I am unable to support this application.

Feel free to contact me for further information.

Please add any further comments

Signed:

Date: