

## Church Leader Recommendation

Complete Section I and then have your pastor, youth pastor, or other church leader within the church you attend who is familiar with your testimony and spiritual development complete Section II. **Whoever you choose needs to have known you for at least six months and must not be related to you.**

### I. To be completed by the applicant (please print or type)

Name \_\_\_\_\_  
Last name First Middle

Home address \_\_\_\_\_  
Street address PO Box City State Zip

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Social Security number \_\_\_\_\_  
(Optional)

Waiver of right of access to confidential statement: *I, the undersigned, hereby voluntarily waive any right to inspect the content of this recommendation.*

Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_

### II. To be completed by the pastor, youth leader, or other church leader

As an applicant, the student named above is required to submit a church leader's recommendation. Your comments are important to us; therefore, provide your complete and careful evaluation. *You must have known the applicant for at least six months and must not be related.* **Please return this completed form promptly to Admissions Office, Cedarville University, 251 N. Main St., Cedarville, Ohio 45314.**

1. How long have you known the applicant? \_\_\_\_\_

2. How well do you know the applicant?     Close personal relationship     Fairly well  
     Casually     By name only

3. Does the applicant profess to be saved/born again?     Yes     No     I don't know  
 Do you observe evidence to support this profession?     Yes     No     I don't know

4. Is the applicant living a consistent Christian life?     Yes     No     I don't know

5. Describe the applicant's pattern of church attendance. He/She attends:  
 Weekly (1-2 times per week)     Occasionally\* (less than once per week)

\*Please explain: \_\_\_\_\_  
 \_\_\_\_\_

6. Indicate level of involvement     Very involved/leader     Involved     Not involved

7. Are the parents saved/born again?     Yes     No     I don't know

8. Describe briefly the applicant's home situation. \_\_\_\_\_  
 \_\_\_\_\_

9. To your knowledge, has the applicant been convicted of a crime?     Yes     No

10. To your knowledge, has the applicant been investigated for or accused of sexual or physical abuse?     Yes     No

## Community Covenant

Cedarville University students affirm yearly their commitment to the **Community Covenant** ([www.cedarville.edu/communitycovenant](http://www.cedarville.edu/communitycovenant)), which summarizes scriptural principles central to spiritual maturity and a healthy Christian community. Students are expected not only to honor the covenant, but also to promote it by providing accountability and, when necessary, correction to their friends and peers.

In addition, Cedarville students agree to abide by other **student life guidelines** found in *The Cedarville Experience* ([www.cedarville.edu/studenthandbook](http://www.cedarville.edu/studenthandbook)). These guidelines include such things as a commitment to purity, honesty, modesty, discretion in media choices, and the prohibition of alcohol.

11. Is the applicant's reputation consistent with the statement above?  Yes  No\*

\*Please explain: \_\_\_\_\_  
\_\_\_\_\_

12. How would you describe the applicant's testimony of purity (within the last year)?

Honorable/above reproach  Have not observed  Questionable\*  Definite problem\*

\*Please explain \_\_\_\_\_

13. How would you describe the applicant's attitude toward authority?

Consistent with biblical teaching  Have not observed  Questionable\*  Definite problem\*

\*Please explain \_\_\_\_\_

14. In social relationships with peers, the applicant is:  Sought out  Accepted  Tolerated

Comments: \_\_\_\_\_

15. The applicant's Christian testimony among his/her peers is:  Positive  Neutral  Negative

Comments: \_\_\_\_\_

16. Please comment concerning the applicant's spirituality, cooperativeness, honesty, tactfulness, and good judgment.

\_\_\_\_\_

### Recommendation Concerning Acceptance:

Based on what the **applicant** can contribute to the spiritual climate of the University, I:

Highly Recommend  Recommend  Recommend with reservations  Prefer not to recommend

Based on what the **University** can contribute to this applicant's spiritual development, I:

Highly Recommend  Recommend  Recommend with reservations  Prefer not to recommend

**I need to discuss this recommendation by phone.**

Name (please print) \_\_\_\_\_ Title \_\_\_\_\_

Church \_\_\_\_\_ Denomination/Affiliation \_\_\_\_\_

Address \_\_\_\_\_  
Street address PO Box City State Zip

Church Phone (\_\_\_\_\_) \_\_\_\_\_ E-mail address \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_ Are you a graduate of CU?  Yes  No

**Mail this completed form directly to:**

**Admissions Office  
Cedarville University  
251 N. Main St.  
Cedarville, OH 45314**

**Or send by fax: 937-766-7575**