

# CHILD EVANGELISM FELLOWSHIP® REFERENCE

CEF Worker or Adult Friend

Applicant's Full Name: \_\_\_\_\_

*The applicant has applied to Child Evangelism Fellowship and has listed you as a reference. A personal recommendation provides insight into a person that would be very helpful in determining his/her ability to perform responsibilities which include, but are not limited to, the following: Sharing the Gospel message and counseling for salvation and Christian growth; teaching a Bible verse; teaching a Bible Lesson; presenting missions. With these specific responsibilities in mind, please be candid and objective as you complete this form.*

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- How long have you known the applicant? \_\_\_\_\_ In what relationship? \_\_\_\_\_
  - How well do you know the applicant? (circle one)      Casually      Well      Very Well
  - Is there any reason(s) known to you why the applicant should not/could not work with children? (circle one)      Yes      No  
If yes, please comment \_\_\_\_\_
  - Applicant's relationship with others is generally (circle one)      Poor      Fair      Good      Very Good
  - What is the applicant's attitude toward authority? (circle one)      Poor      Fair      Good      Excellent
  - What are the applicant's strong points? \_\_\_\_\_
  - What are the applicant's weaknesses or limitations? \_\_\_\_\_
  - What is the applicant's general outlook on life? (circle one)      Pessimistic      Optimistic      Unknown
  - Has the applicant been active in the church? \_\_\_\_\_ If so, in what capacities? \_\_\_\_\_
  - In what aspect(s) of ministry have you personally observed this applicant? \_\_\_\_\_
  - Does the applicant work well with others? (circle one)      Yes      No      If no, please comment \_\_\_\_\_
  - Are you aware of any unbiblical sexual tendency in the applicant? (circle one)      Yes      No  
If yes, please comment \_\_\_\_\_
  - How do you rate the applicant's leadership ability? (circle one)      Fair      Good      Very Good      Excellent
  - What is the applicant's work ethic? (circle one)      Undependable      Dependable
  - How would you rate the applicant's standards for Christian living? (circle one)  
Poor      Fair      Good      Very Good      Excellent
  - Has the applicant any special talents or abilities? \_\_\_\_\_
  - How do you rate this applicant's potential for children's ministry? Please give comments regarding your position.  
(circle one)      Average      Good      Superior \_\_\_\_\_
  - Would you recommend that we accept this applicant? (circle one)      No      Questionable      Yes

| CHARACTER TRAIT EVALUATION             | Not Known | Poor | Below Avg. | Avg. | Above Avg. | Excellent | COMMENTS |
|--|-----------|------|------------|------|------------|-----------|----------|
| <b>SOCIAL MATURITY</b>                 |           |      |            |      |            |           |          |
| Ability to communicate                 |           |      |            |      |            |           |          |
| Ability to develop relationships       |           |      |            |      |            |           |          |
| Attitude in confrontation              |           |      |            |      |            |           |          |
| Tactfulness/Sensitivity                |           |      |            |      |            |           |          |
| <b>LEADERSHIP MATURITY</b>             |           |      |            |      |            |           |          |
| Drive/Initiative                       |           |      |            |      |            |           |          |
| Ability to quickly learn new materials |           |      |            |      |            |           |          |
| Conflict resolution                    |           |      |            |      |            |           |          |
| Ability to handle stress               |           |      |            |      |            |           |          |
| Ability to make split-second decisions |           |      |            |      |            |           |          |
| Ability to work independently          |           |      |            |      |            |           |          |
| <b>SPIRITUAL MATURITY</b>              |           |      |            |      |            |           |          |
| Consistent spiritual walk              |           |      |            |      |            |           |          |
| Knowledge of the Bible                 |           |      |            |      |            |           |          |
| Sense of call or mission               |           |      |            |      |            |           |          |
| Submission to authority                |           |      |            |      |            |           |          |
| <b>EMOTIONAL MATURITY</b>              |           |      |            |      |            |           |          |
| Self-image                             |           |      |            |      |            |           |          |
| Freedom from worry anxiety             |           |      |            |      |            |           |          |
| Relationship with opposite sex         |           |      |            |      |            |           |          |
| Marital harmony (if applicable)        |           |      |            |      |            |           |          |
| <b>PERSONAL MATURITY</b>               |           |      |            |      |            |           |          |
| Self-discipline                        |           |      |            |      |            |           |          |
| Conscientiousness                      |           |      |            |      |            |           |          |
| Perseverance                           |           |      |            |      |            |           |          |
| Common sense and judgment              |           |      |            |      |            |           |          |
| Flexibility                            |           |      |            |      |            |           |          |
| Decisiveness/follow through            |           |      |            |      |            |           |          |
| Servant's attitude                     |           |      |            |      |            |           |          |

Address \_\_\_\_\_

Telephone # \_\_\_\_\_ Position or occupation \_\_\_\_\_

Date \_\_\_\_\_ Print Full Name \_\_\_\_\_ Signature \_\_\_\_\_

For any further comments please use an additional sheet of paper.

**Mail this reference to: CEF of Northern Virginia, 8001 Forbes Place, Suite 101, Springfield, VA 22151**