Antioch Discipleship School

A School of Transformation

Application 2018-2019 **REFERENCES**

Pastor/Mentor/Life Group Leader Reference

(someone in direct authority over you in a ministry/spiritual environment)

| I,have applied to be a student in the Day/Night (<u>please circle one)</u> Antioch Discipleship School beginning in September, 2018. | | | | |
|--|--|--------------------------------------|--|--|
| fitness for this school. The evaluating both my asse | ne Discipleship So ts and liabilities. Y that your reply w | chool staff would our prompt coop | appreciate your hones eration in filling out th | cerning my character and it, straightforward answers, iis form will be greatly I will not see this form after |
| Reference Name: | | | Phone: | |
| How long have you know | vn the applicant? | | | |
| In what relationship? | | | | |
| How well would you say | you know the app | olicant? (Please c | ircle one) | |
| Very Well | Well | Average | Not Very Well | Almost Not at All |
| Please discuss the follow please attach additional | = | on your knowledg | e of the applicant. If f | urther space is needed, |
| Is there any indication influenced by: | that the applicar | nt's decision to do | the Discipleship Scho | ol has been significantly |
| a. A desire to esc b. An unrealistic | | • | situations? Yes / No ristian service? Yes / N | No |
| If yes, please explain: | | | | |
| 2. Does the applicant ha | | | | nem? Yes / No |
| If no, please explain: | | | | |

| 3. How does the applicant respond to authority? |
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| 4. Can the applicant take responsibility and demonstrate leadership? Give examples: |
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| 5. Comment on the applicant's: |
| Sensitivity to the needs, feelings and attitudes of others: |
| Ability to work with others: |
| 6. What is the applicant's attitude toward other groups, races or nationalities? |
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| 7. To your knowledge, how does the applicant respond under difficult circumstances? |

Revised April 2018

| Revised | April | 2018 |
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- 8. Are you aware of any instance(s) of mental or emotional illness or difficulty that the applicant has had? Yes / No (circle one) If yes, please explain on a separate page.
- 9. To your knowledge, has the applicant ever used narcotics, hallucinogens or drugs not prescribed by a physician? Yes / No (circle one) If yes, please explain on a separate page.
- 10. Do you have any reservations concerning the financial integrity and/or the indebtedness of the applicant? Yes / No (circle one) If yes, please explain on a separate page.
- 11. Have you ever had reason to question the applicant's morals? Yes / No (circle one) If yes, please explain on a separate page.

| oignature: | Date:// |
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This form is an essential part of each student's acceptance into the Antioch Discipleship School. Please mail this form directly to ANTIOCH COMMUNITY CHURCH by Sunday June 17, 2018. The applicant should provide you with a stamped, addressed envelope to: Antioch Community Church - Attn: Wil Bostwick - 1125 N Dobson Rd - Chandler, AZ 85224.

Employer or Teacher Reference

(someone in direct authority over you in a work/school environment)

| Dear Employer or Teacher, | |
|--|--|
| I,, am applying to be part of a Christian Bible and Discipleship School next fall. The school is part of Antioch Community Church, a non-denominational Christian church. The staff of the school would appreciate your honest, straightforward answers evaluating both my assets and liabilities. Your prompt cooperation in filling out this form will be greatly appreciated. Be assured that your reply will be held in strict confidence and that I will not see this form after you complete it (Due June 17, 2018). | |
| Any questions about this form can be directed to Wil Bostwick, Antioch Discipleship School Director, at william@antiochphx.com | |
| Reference Name:Phone: | |
| Reference Occupation: | |
| How long have you known the applicant? | |
| In what relationship? | |
| How well would you say you know the applicant? (Please check one) | |
| Casual relationship Work together daily Close, professional relationship | |
| Friendship outside of work or school Long-term family friend or personal friendship | |
| 1. Does the applicant show up on time to work or school? Yes / No | |
| If no, please explain: | |
| 2. Does the applicant have the ability to make decisions and follow through on them? Yes / No | |
| If no, please explain: | |

| Revised April 2018 |
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| 3. How does the applicant respond to authority? |
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| 4. Can the applicant take responsibility and demonstrate leadership? Give examples: |
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| 5. Comment on the applicant's |
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| Sensitivity to the needs, feelings and attitudes of others: |
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| Ability to work with others: |
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| 6. To your knowledge, how does the applicant respond under difficult circumstances? |
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| |
| 7. |
| 7. Are you aware of any instance(s) of mental or emotional illness or difficulty that the applicant has had? Yes / No |
| If yes, please explain on another page. |
| |
| 8. To your knowledge, does the applicant have any issue with drug or alcohol abuse? Yes / No If yes, please explain on another page. |
| if yes, prease explain on another page. |

| Revised | April | 2018 |
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| 9. Do you have any reservations concerning the financial integrity and/o | or the indebtedness of the applicant? |
|--|---------------------------------------|
| If yes, please explain on another page. | |
| 11. Have you ever had reason to question the applicant's morals? Yes / North If yes, please explain on another page. | No |
| 12. What outstanding abilities or talents does the applicant have? | |
| | |
| 13. Is there anything else our church should consider before placing this leadership? | |
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| | |
| Signature: [| Date:/ |

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