

Pastor/Co-Worker Recommendation Form for Youth Counselors

Thank you so much for taking the time to fill out this recommendation form! If you are unfamiliar with this applicant, perhaps you can get help from someone else in the congregation.

We praise God for your willingness to support in the youth counseling ministry. Please Mail or e-mail to the following contact:

By Email: matt.ong91@gmail.com

*Please put "Lake Yale 2020 Youth Counselor (Counselor Name)" in the subject line Email

By Mail: Matthew Ong, 4712 Grandview Avenue, New Port Richey, FL 34652

Counselor name: _____

Your Name: _____ Your Phone Number: _____

Name of church: _____

Is the counselor baptized? _____

How long have you known the applicant? _____

In what capacity? _____

Please answer to the best of your abilities the following questions concerning the counselor:

Is the counselor trustworthy? _____Yes _____No

Is the counselor consistent and growing in their faith? _____Yes _____No

Does the counselor have adequate knowledge of the Bible? _____Yes _____No

Is the counselor able to get along with people? _____Yes _____No

Can the counselor work well in a group setting? _____Yes _____No

Is the counselor actively serving in their home church/church they're attending? _____Yes _____No

Would you entrust your child to the counselor? _____Yes _____No

If you answered "No" to any of the above questions, please explain below.

Additional Comments?

*By signing, you hereby authenticate and certify your full approval, clearance, and endorsement of the individual to serve as a youth counselor at Lake Yale.

Signed: _____ Date: _____