



# Internship

PROGRAM

**PROFESSIONAL/PERSONAL REFERENCE**

Applicant Name: \_\_\_\_\_

Internship Desired: \_\_\_\_\_

Please return this form directly to:

**INTERNSHIP PROGRAM**



**CENTRAL WESLEYAN CHURCH**  
446 W 40TH STREET  
HOLLAND, MI 49423  
616.392.7083

**THANK YOU FOR YOUR TIME IN FILLING OUT THIS REFERENCE!**

1. How long have you known the applicant?

---

---

---

2. What is your relationship to the applicant?

---

---

---

3. How have you seen the applicant live out his/her faith?

---

---

---

4. Have you seen evidence of this applicant's interest in and work with the area of ministry he/she is applying for? Please describe.

---

---

---

5. What do you see as some of this applicant's greatest strengths?

---

---

---

6. In what area(s) would you like to see the applicant develop?

---

---

---



7. Feel free to write in additional comments. Please respond by scoring as follows:

**1 = always, 2 = usually, 3 = sometimes, 4 = seldom, 5 = never, U = unknown.**

**Emotional behavior:** Does the candidate display appropriate responses to difficult situations? Are they generally even tempered, predictable and approachable?

1    2    3    4    5    U

**Personal Maturity:** Consider the applicant's integrity, thoughtfulness, accuracy of perception, judgment, common sense, self-awareness and weaknesses.

1    2    3    4    5    U

**Social Sensitivity:** Consider the applicant's ability to be sensitive, understanding to others' feelings and reactions, and ability to make effective, insightful responses.

1    2    3    4    5    U

**Motivation for Ministry:** Consider the applicant's desire to serve Jesus Christ; his/her love for the church and grace for fellow Christians; risk-taking ability, humility and response to challenge.

1    2    3    4    5    U

Full name \_\_\_\_\_

Date \_\_\_\_\_ Daytime phone \_\_\_\_\_ Evening phone \_\_\_\_\_

Position, if working \_\_\_\_\_

Email \_\_\_\_\_

**SUBMIT**





# Internship PROGRAM

## PASTORAL REFERENCE

Applicant Name: \_\_\_\_\_

Internship Desired: \_\_\_\_\_

Please return this form directly to:

**INTERNSHIP PROGRAM**



**CENTRAL WESLEYAN CHURCH**  
446 W 40TH STREET  
HOLLAND, MI 49423  
616.392.7083

**THANK YOU FOR YOUR TIME IN FILLING OUT THIS REFERENCE!**

1. How long have you known the applicant?

---

---

---

2. What is your relationship to the applicant?

---

---

---

3. How have you seen this applicant's relationship with God develop?

---

---

---

4. Have you seen evidence of this applicant's interest in and work with the area of ministry he/she is applying for? Please describe.

---

---

---

5. Would you describe this person as someone who desires life with God? Why or why not?

---

---

---

6. In what area(s) would you like to see the applicant develop?

---

---

---



7. Feel free to write in additional comments. Please respond by scoring as follows:

**1 = always, 2 = usually, 3 = sometimes, 4 = seldom, 5 = never, U = unknown.**

**Emotional behavior:** Does the candidate display appropriate responses to difficult situations? Are they generally even tempered, predictable and approachable?

1    2    3    4    5    U

**Personal Maturity:** Consider the applicant's integrity, thoughtfulness, accuracy of perception, judgment, common sense, self-awareness and weaknesses.

1    2    3    4    5    U

**Social Sensitivity:** Consider the applicant's ability to be sensitive, understanding to others' feelings and reactions, and ability to make effective, insightful responses.

1    2    3    4    5    U

**Motivation for Ministry:** Consider the applicant's desire to serve Jesus Christ; his/her love for the church and grace for fellow Christians; risk-taking ability, humility and response to challenge.

1    2    3    4    5    U

Full name \_\_\_\_\_

Date \_\_\_\_\_ Daytime phone \_\_\_\_\_ Evening phone \_\_\_\_\_

Position, if working \_\_\_\_\_

Email \_\_\_\_\_

**SUBMIT**

