

Disciple Makers Reference Form Peer

To assist Disciple *Makers* in evaluating me as a potential missionary, would you kindly fill out this reference form and return it to them in the accompanying envelope? All information will be kept confidential. Disciple *Makers* greatly appreciates your input.

Name of Applicant:	Date:
Reference's Contact Information	
Name: Address:	
Phone #:	
Reference's Evaluation of Applicant	
1. How long have you known the applicant?	
2. What is your assessment of the applicant's spiritual life and disciplin	es?
3. What strengths do you feel the applicant would bring to our organiza	tion?
4. What weaknesses do you feel the applicant would bring to our organ	nization?
5. What would be your reaction if your son or daughter were under the	leadership of the applicant?
6. Do you have any reservations in recommending the applicant for our	r organization? If yes, what are they?
7. Do you have any other thoughts/comments? Please feel free to inc this applicant which you feel would assist us in evaluating them for join	

Please return form to: Disciple *Makers*, 365 Science Park Road, State College, Pennsylvania 16803 For Inquiries: Phone: 814-234-7975 Fax: 888-672-6135 info@dm.org www.dm.org