



STUDENT LEADERSHIP INSTITUTE

RECOMMENDATION FORM – NEW APPLICANTS

Applicant Information

Name (Last, First, M)

Date of Birth (mm/dd/yyyy)

This section should be completed by the Applicant's youth pastor or school instructor. All responses will remain confidential. **Please complete and submit online by Wednesday, April 8th.**

Recommender Information

Name (Title, First, Last)

Company/Organization

Current Position

What is your relationship to the Applicant?

Applicant Evaluation

The Student Leadership Institute seeks students who consistently demonstrate I Timothy 4:12 traits. To what degree does the applicant consistently honor Christ in his/her speech, conduct, love, faith, and purity?

The Student Leadership Institute requires a very high level of commitment. Please evaluate the applicant's level of commitment.

Please evaluate your level of confidence in the applicant's ability to mentor younger students.

Additional Comments:

Signatures:

I (recommend strongly /recommend with some reservation/do not recommend) the Applicant to participate in Student Leadership Institute.

Recommender Signature

Date