



Confidential Reference

Joshua Project Volunteer

TO THE APPLICANT

Complete **this page** and give this form to a person who can provide this specific reference and who knows you well.

REFERENCES FOR PASTORS: *If you are a pastor, please have two members of your church leadership (one of which must be the **chairman** of your leadership board) complete the references.*

REFERENCES FOR Member of church: *If you are a layperson, please have your **pastor** and another **church leader** fill out the references.*

This page to be completed by the APPLICANT

Age	18-25	26-30	31-35	36-40	41-45	45-50	50+
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Surname	First name	Middle name/s
Permanent address		Country (<i>if not RSA</i>)
post code:		PHONE NUMBER

Signature of Applicant: _____ Date: _____



The following pages to be completed by the REFERENCE (# 1)

The candidate named above is applying to volunteer at Joshua Project Drop-In Center.

The Admission Committee finds confidential, candid, thorough evaluations invaluable in the decision-making process. Please feel free to include any information on the candidate that you feel is pertinent, and remember that your prompt appraisal will help to assure full consideration. Please complete this form, along with any additional comments, and return to the applicant in a sealed envelope. You may also email your reference to info@joshuaproject.co.za

APPLICANTS NAME: _____

A. GENERAL EVALUATION

Please give your evaluation of the applicant by marking the appropriate block with an X.

COOPERATION Consider willingness to work with people in various capacities, loyalty.	Outstanding	When convenient	Indifferent	Unwilling	Not observed
EMOTIONS Consider reactions in various situations when stress is likely.	Well balanced	Fairly well balanced	Easily depressed	Unresponsive	Not observed
INITIATIVE Consider ability to see things to do, resourcefulness, aggressiveness.	Seeks additional tasks	Fairly well balanced	Does assigned tasks	Needs prodding	Not observed
JUDGMENT & COMMON SENSE Consider ability and foresight in decisions in everyday situations.	Sound decisions	Fair deductions	Poor results	Lacks ability	Not observed
LEADERSHIP Consider ability to others.	Consistently a leader	Usually a leader	Leads occasionally	Seldom never leaves	Not observed
PERSONALITY Consider mannerisms and appearance, general impression on others.	Well liked	Accepted	Tolerated	Rejected	Not observed
RELIABILITY Consider dependability, willingness, and consistency.	Conscientious	Usually reliable	Erratic	Unreliable	Not observed
CHRISTIAN CHARACTER Consider maturity, vitality, and consistency of life.	Outstanding/ Mature	Usually consistent	Questionable at times	Little or no evidence	Not observed
COMMUNICATION SKILLS Consider ability to present thoughts with logic and clarity.	Outstanding	Good	Has difficulty	Unable to communicate Clearly	Not observed
HEART FOR CHILDREN Does the applicant show a heart for children's ministry	Outstanding	Good	Questionable at times	Little or no evidence	Not observed
Experience in Children's Ministry	Outstanding	Good	Needs guidance	Lacks ability	Not observed

B. CONFIDENTIAL REFERENCE (# 1)

How long have you known the applicant? _____

Are you related to the applicant? Yes No

Is the applicant a member of your church? Yes No

Has the applicant been consistent in attendance? Yes No

In what church activities has the applicant participated?

Is the church supportive of the applicant pursuing specialized ministry in its midst? Explain.

If married, is the applicant's spouse supportive of his/her desire to volunteer?

Yes No – Reason _____

What spiritual gifts has the applicant demonstrated?

Do you believe the applicant evidences the giftedness and promise for a Christian ministry in drop-in center for children? In what areas of ministry could you foresee the applicant serving?

Do you believe the applicant's knowledge and interpretation of the bible is sufficient for him/her to minister to children?

Give a brief statement of any family background which would be of help in our understanding of the applicant's needs and/or qualifications for this type of ministry

Can you conscientiously recommend the applicant for admission to this programme?

yes, with confidence yes, with the following reservation(s): no (*please explain*)

In what way will your organization commit to support the applicant if the application to volunteer at Joshua Project is successful? (Tick all applicable)

Mentorship	<input type="checkbox"/> Monthly	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Bi-Annual	<input type="checkbox"/> Annual
Discipleship	<input type="checkbox"/> Monthly	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Bi-Annual	<input type="checkbox"/> Annual
Stipend R_____	<input type="checkbox"/> Monthly	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Bi-Annual	<input type="checkbox"/> Annual
Educate (training, workshops)	<input type="checkbox"/> Monthly	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Bi-Annual	<input type="checkbox"/> Annual
Nurture				

Any other way of support not mentioned above:

Please indicate the areas where you think the applicant could minister in:

Education

AET(literacy and numeracy program) Computer teaching

Arts and Craft

Arts and craft Woodcraft

Skills development

Carpentry Mechanics Gardening Tiling
 Sports Dance Music Drama

Life orientation

Life skills

Special Events

Fund raising PR assistant

Maintenance

Repairs and construction IT Painting

Others

Organizing activities, outings, camps Homework Support

Is there any medical conditions we need to be aware of? If yes, please give brief description:

Surname	First name	Position
Organization and Address		Phone Number
		Date
Email	Signature	