



Application Support Form

FOR THE APPLICANT

Please complete this part of the form, sign it and give it your supporting Pastor or a senior leader in your church.

Applicants Name

Phone No.

Email Address

I understand that this confidential information is being submitted directly to the enrolment registrar at I.M.T.A. and that its content will not be shared with me. I hereby waive my right to see any of the information submitted on this form.

Applicants Signature

Date

FOR THE PASTOR OR CHRISTIAN LEADER

Please complete this form and return it directly to our office. The address details are below (and at the end of this Form).

Referee's Name

Church / Organization Name

Office Phone No.

Mobile Phone No.

Leaders Signature

NOTE TO REFEREE

The material in this reference is evaluative in nature and hence cannot be accessed under the Privacy Act 1993. That means that this reference is completely confidential between you (the referee) and us (Issachar Ministry Training Academy).

The above student is applying for admission to Issachar Ministry Training Academy and is asking you to provide them with a character reference. We are a Christian training ministry and our aim is to admit those who would profit most from their studies. It would be most helpful therefore if you are honest, fair and accurate with your remarks. We will hold your comments in the strictest confidence.

The applicant has given consent to Issachar Ministry Training Academy to gather and to hold this confidential reference concerning him/her as part of the application approval process and for the purpose of pastoral care and support. For clarification purposes, we may follow up this reference with a phone call.

Position/Role

Website Address

Email Address

Date

KNOWLEDGE OF THE APPLICANT

1. How long have you known this applicant? _____
2. How well do you know the applicant? ☐ Very well ☐ Casually ☐ Hardly at all
3. How would you describe the applicants spiritual commitment? ☐ Wholehearted ☐ Somewhat committed
☐ Lukewarm ☐ Not sure of his/her salvation
4. What roles, offices, ministries has the applicant held and/or been involved in?

5. Please describe your observations of the applicant's attitudes/responses in the following aspects of Christian life.

Servanthood

Witnessing

Response to authority

Leadership skills

Handling responsibilities

Motivation

Relationship skills

Personal & moral integrity

Emotional stability

6. Please list any peculiarities, doctrinal or otherwise, which may be an issue for this applicant in our environment and/or in ministry situations.

7. What do you see as this applicant's strengths?

8. What do you see as this applicant's weaknesses?

9. Are there any particular ministry giftings or callings that you have seen or foresee this applicant functioning in?

APPLICATION SUPPORT

1. What is your viewpoint concerning this applicant seeking enrolment in the Issachar Ministry Training Academy?

☐

I am in full support of this applicant's decision to enrol and believe he/she should be accepted.
Therefore, I recommend this applicant.

☐

I am not fully persuaded that this applicant should enrol at this time or that he/she should be accepted.
Therefore, I recommend this applicant with reservations.

☐

I do not support this applicant's decision to enrol.
Therefore, I do not recommend this applicant.

Further comments

2. If you support this applicant's enrolment with Issachar Ministry Training Academy, how will you and/or your church staff be involved in on-going encouragement and support during the period this applicant is studying with us?

3. Whom should we contact if we need to discuss matters of pastoral care etc., if this applicant is enrolled with us?

Name: _____ Phone: _____ Email: _____

NOTE TO REFEREE

Thanks so much for taking the time to complete this reference. Your assistance is greatly appreciated. Can we ask you to please post this form to us at: **Issachar Ministry Training Academy, PO Box 305-063, Triton Plaza, Auckland, New Zealand** or to scan it and email the scanned copy to us at **office@issachar.nz**?

If you have any questions regarding anything in this form or wish to discuss anything specific concerning this applicant and his/her decision to study at the Issachar Ministry Training Academy, please contact us at **+64-9-442 2530** or by email at: **office@issachar.nz**. Our website address is: **www.issachar.nz**.