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| **CHURCH LEADER RECOMMENDATION FORM** |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_is applying to become a student leader with the Connectional Youth Ministry of the Christian Methodist Episcopal Church.  |
| **Describe your relationship to the student** | **How long have you known him/her?** |  |
|  |
| **Please indicate what you consider to be the applicant’s strength** |
|  |
| **Please describe any weaknesses of the applicant of which we should be aware:**  |
|  |
| **How would you best describe the applicant in the following categories?** |
|  | Excellent | Above Average | Average | Below Average |
| Social Adaptability | 1 | 2 | 3 | 4 |
| Hard Worker | 1 | 2 | 3 | 4 |
| Integrity and Honesty | 1 | 2 | 3 | 4 |
| Responsibility | 1 | 2 | 3 | 4 |
| Teachable Spirit | 1 | 2 | 3 | 4 |
| Emotional Stability | 1 | 2 | 3 | 4 |
| Leadership | 1 | 2 | 3 | 4 |
| Ability to be a Team Player | 1 | 2 | 3 | 4 |
| Open to Correction | 1 | 2 | 3 | 4 |

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| **Are there any areas of leadership that you feel would benefit the student?** |
|  |
| **Do you have any concerns regarding this student being a spiritual leader in the Connectional Youth Ministry of the Christian Methodist Episcopal Church?** |
|  |
| **Church Leader Name**  |  |
| **Contact #** |  |
| **Email** |  |

**Please circle one**:

I recommend. I recommend with *reservation.* I *do not* recommend.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**School /Community Leader Signature Date**

**Thank you for taking the time to complete the recommendation form. We ask that you kindly upload the recommendation form to** [**https://tinyurl.com/ILEADRecommend**](https://tinyurl.com/ILEADRecommend) **by December 1, 2023.**

**NOTE:**

**If you have any questions, please contact:**

**Rev. Cyreeta Collins, Connectional Youth Ministry Director**

**RevCeCe@thecmechurch.org****.**