

FRIEND'S REFERENCE FORM

(Please complete and return to address below)

Name of Applicant _____ Email _____
Surname First Name

What are you applying for: _____ Starting Date: ____/____/____
dd/mm/yyyy

The above applicant has applied for admission to YOUTH WITH A MISSION Bonoua for staff position. In processing staff applications we aren't looking for perfect people, but we are looking for people with sweet hearts. We value your insight and will give due consideration to your comments. Thank you for your assistance.

On a scale of one to five, how well do you feel you know the applicant? (1 being very little) 1 2 3 4 5

How long have you known the applicant? _____

1. Please, mark any of the following which describe the applicant's Christian experience? Growing
 Mature Superficial Over-emotional Genuine Disillusioned/Weary Contagious

Please, comment on your selections: _____

2. Comment on his/her desire to share his/her faith with those who don't know Jesus.

3. How does he/she respond to correction? _____

4. Comment on how he/she deals with community living? _____

5. Are there any reservations concerning his/her financial integrity? Yes No.
 If yes, please explain: _____

6. What is his/her interaction with the opposite sex like? _____

7. Do you feel like this person is currently capable of discipling others? Yes No. If no, please explain or give examples: _____

8. Please, mark *all* the words which apply most to the applicant: Hard worker

Serve with joy Initiative taker Self-discipline person Reliable (Responsible)

9. If you were sending your child or younger sibling to a missionary school, would you want this applicant as their leader/mentor? Yes No. if no, please explain: _____

10. Do his/her moral choices reflect wisdom and set an example for those he/she will be leading?

11. Please, mark *all* words which pertain to the applicant:

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> Impatient | <input type="checkbox"/> Intolerant of others | <input type="checkbox"/> Argumentative | <input type="checkbox"/> Prejudice towards groups |
| <input type="checkbox"/> Domineering | <input type="checkbox"/> Critical of others | <input type="checkbox"/> Easily embarrassed | <input type="checkbox"/> Prejudice towards races |
| <input type="checkbox"/> Easily Offended | <input type="checkbox"/> Discouraged | <input type="checkbox"/> Frequently worried | <input type="checkbox"/> Prejudice towards nationalities |
| <input type="checkbox"/> Anxious | <input type="checkbox"/> Nervous or Tense given to moods | <input type="checkbox"/> Unable to cope with stress | |
| <input type="checkbox"/> Addictive behavior | <input type="checkbox"/> Erratic in attitudes | <input type="checkbox"/> Eating Disorders | <input type="checkbox"/> Self-harming behaviors |

12. Please, comment on the applicant's involvement with his/her church: _____

13. Please, comment on the applicant's suitability for missionary service, adding any considerations that may influence the person effectiveness: _____

Is there anything you would like to us to call to discuss with you? Yes No

Would you like to receive more information about **YWAM Bonoua** and its ministries? Yes No

Friend's Name: _____ Skype: _____

Country Code & Phone: _____ Email: _____

Postal Address: _____ **2**

Please, send all forms to: **Personnel Department, YWAM Bonoua, P.O Box: 759 Bonoua, Côte d'Ivoire**
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