



Shelter the Homeless International Projects

Reference Form for Long-term International Missions Internship

I, _____, am applying for an international internship position with Shelter the Homeless International Projects (SHIP). To allow SHIP to better assess my character, maturity, and fitness for this Biblically based ministry, I am asking you, _____, to serve as a reference for me. I have authorized SHIP to contact you, and I authorize you to give SHIP any information you may have regarding my character, maturity, and fitness for this ministry position with SHIP. I release SHIP, all of its agents, and you from any and all liability for any damage that may result from furnishing such information to SHIP, and I waive any right that I may have to inspect references on my behalf.

Applicant's Signature

Date

Reference's Name: _____ Relationship to the Applicant: _____

Mailing Address: _____

Phone: (Home) _____ (Work) _____ (Cell) _____

Character Trait Evaluation	Not Known	Poor	Below Average	Average	Above Average	Excellent	Comments
Please check only 1 box per row for each item below.							
1. Expresses thoughts with clarity							
2. Tactful and sensitive							
3. Cooperative							
4. Develops & maintains friendships							
5. Team player							
6. Learns from others							
OVERALL SOCIAL MATURITY							
1. Strength of self-image							
2. Awareness of strengths & weaknesses							
3. Emotional stability							
OVERALL EMOTIONAL MATURITY							
1. Consistent spiritual walk							
2. Proven ministry ability							
3. Devotional life							
OVERALL SPIRITUAL MATURITY							
1. Common sense and judgment							
2. Self-disciplined							
3. Appearance and manner							
4. Organized							
5. Dependable & follows through							
6. Sees things to do and takes initiative							
OVERALL PERSONAL MATURITY							

1. How long have you known this applicant? _____
 a. In what capacity? _____
 b. How well do you know the applicant? _____
2. Please summarize this person's strengths and abilities. _____

3. Please summarize this person's weaknesses and areas of need. _____

4. Are there any reasons that cause you to lack confidence in this applicant? Yes ____ No ____
 If yes, please explain. _____

5. Based on your knowledge, how does this person respond under difficult and stressful circumstances? ____

6. Describe how this person relates to others, both one-on-one and in groups. _____

7. Overall, what recommendation would you give for this applicant and why?
 ____ I believe this person is well qualified for ministry for the following reasons: _____

 ____ I'm apprehensive about recommending this person for ministry for the following reason: _____

 ____ I would NOT recommend this person for ministry for the following reasons: _____

8. Please give any additional comments you feel would be helpful in assessing this applicant. _____

 Reference's Signature

 Date

When you have completed this Reference Form, please return it to SHIP – not the applicant – by email (preferred) or mail:

SHIP
 P.O. Box 3003
 Bryan, TX 77805-3003
 Email: contact@shipinternational.org