



08/09

CSMI Internship Program

Recommendation Form

Parent

Applicant: Please fill in the info on this page, **then** give to the *References* you listed on page 8 of the Application.

Applicant's Name _____

Home Address

City

State

Zip

Phone Number (____) _____ Today's Date _____

Recommender: The above-named student has applied with CSMI Internship Program through Fellowship of Christian Athletes, and has asked that you would give a recommendation. We would be grateful if you would give your honest evaluation of the applicant by responding to the questions on the following pages.

Your prompt cooperation by completing and returning this form (within 7 days) is greatly appreciated. Be assured that your response will be held in strict confidence. *Thank you!*

Please mail to: CSMI Internship Program
Fellowship of Christian Athletes
PO Box 62658
Colorado Springs, CO 80962

CSMI Internship Program Recommendation Form

Name of Recommender _____
First *Middle* *Last*

Position or Title _____ Name of Ministry _____

Address _____
Street *City* *State* *Zip*

Day time Phone (____) _____ E-mail _____

Relationship to Applicant _____ How long have you known the Applicant? _____

1. Do you believe that the applicant has a personal relationship with Jesus Christ?

2. If this applicant is accepted into the CSMI Internship Program, his/her most important need for personal development will be?

3. What makes this applicant special? _____

4. Any additional comments about the applicant? _____

5. Please comment briefly on the family and social background of the applicant _____

6. Would you like to discuss the program or the applicant with someone from our staff? ! Yes ! No

7. As a parent/professional, is there anything you believe we would like to know about the applicant? ! Yes ! No
If yes, please explain _____

Please check which of the following descriptions apply best to the applicant.

| | Outstanding | Strong | Adequate | Inadequate | Unknown |
|-------------------------------|-------------|--------|----------|------------|---------|
| Emotional stability | | | | | |
| Self Confidence | | | | | |
| Adaptability | | | | | |
| Servant attitude | | | | | |
| Teachable attitude | | | | | |
| Leadership ability | | | | | |
| Joyfully submits to authority | | | | | |
| Personal demeanor | | | | | |
| Peer relationships | | | | | |
| Spiritual maturity | | | | | |
| Personal maturity | | | | | |
| Social readiness | | | | | |
| Creative instinct | | | | | |
| Responsibility | | | | | |
| Initiative | | | | | |
| Communication | | | | | |
| Teamwork | | | | | |
| Church involvement | | | | | |
| Potential | | | | | |
| Parachurch involvement | | | | | |

Do you:

- ! Strongly recommend for acceptance
- ! Recommend for acceptance
- ! Hesitate in recommending for acceptance
- ! Do not recommend for acceptance

Signature

Date

Thank you for your time!