

T-NET CENTER RECOMMENDATION FORM - TELEO UNIVERSITY

(Teleo University partners with T-Net Training Centers to provide fellowship, student life, and a context for collaboration as facilitated study groups. This form must be completed by your T-Net Training Center study group facilitator. Contact Teleo University if you are not currently being mentored through involvement in a T-Net Training Center.)

APPLICANT'S INFORMATION *(To be completed by the applicant)*

Name: _____
First/Given Last/Family/Surname Former/Maiden Name

Email: _____ Phone: _____

Special Note: Public law gives you the right to review this reference form after you enroll at Teleo University. You may retain this right under the law, or you may choose to waive this right in order that the answers given your reference may remain confidential. If you wish to waive your right to review this form and ensure confidentiality, please sign below.

Applicant's Signature: _____ Date: _____
Month / Day / Year

T-NET TRAINER-FACILITATOR RECOMMENDATION RESPONSES *(To be completed by the T-Net Training Center Study Group Trainer-Facilitator)*

- My T-Net training center relationship with the applicant is: Lead Trainer/Facilitator Assistant Trainer/Facilitator
- I have known the applicant:
 less than 1 year 1-2 years 3 - 5 years more than 5 years
- I know the applicant:
 well (personally) very well (personally) extremely well (personally and professionally)
- The applicant's marital status is:
 single married divorced separated widowed
- Please rate the applicant in each of the following areas. Circle the number that best represents where the applicant fits on the scale of 1-10 for each category. Or, if you are unsure in a category circle "Do Not Know."

Ministry Commitment: *love for people, clear call to ministry, loyal to Christ and His church, a disciple maker*
 unclear 1 2 3 4 5 6 7 8 9 10 Clear call to ministry Do Not Know

Personal Lifestyle: *approachable, appropriate personal appearance, a good manager of time and money*
 unclear 1 2 3 4 5 6 7 8 9 10 clear Do Not Know

Personality: *positive, likable, emotionally stable, self-starter, mature judgment*
 withdrawn 1 2 3 4 5 6 7 8 9 10 friendly Do Not Know

Family Life: *Makes time for family, the spouse is supportive (if married)*
 poor 1 2 3 4 5 6 7 8 9 10 excellent Do Not Know

Preaching / Teaching Ability: *strong biblical content, correct doctrine, clear communication, practical, compelling*
 poor 1 2 3 4 5 6 7 8 9 10 excellent Do Not Know

Pastoral / People Care: *concern for people, confidentiality, Relates to all age levels*
 unclear 1 2 3 4 5 6 7 8 9 10 clear Do Not Know

Leadership Skills: *ability to organize, manages business affairs well, decisive, delegates well*
 hesitant 1 2 3 4 5 6 7 8 9 10 strong leader Do Not Know

Interpersonal Communication: *works well with others, listens well, admits own limitations, accepting*
 distant/proud 1 2 3 4 5 6 7 8 9 10 friendly/approachable Do Not Know

Honesty / Integrity: *good reputation, dependable, trustworthy, not greedy, acts appropriately with the opposite sex*
 some concerns 1 2 3 4 5 6 7 8 9 10 high integrity Do Not Know

6. Is the applicant living a consistent Christian life? Yes No
7. How would you rate the applicant's dedication to God and devotion to Christian principles?
 extremely high above average low or inconsistent I do not know
8. How would you rate the applicant's commitment to a life of ministry?
 extremely high above average low or inconsistent I do not know
9. How would you rate the applicant's commitment to disciple making and finishing the Great Commission?
 extremely high above average low or inconsistent I do not know
10. Does the applicant have authorization to implement course assignments in a local church? Yes No
11. If you wish to provide any further comments about the applicant, please do so in the space provided below:

CONTACT INFORMATION FOR T-NET TRAINING CENTER REFERENCE *(To be completed by T-Net facilitator)*

Name (T-Net Trainer-Facilitator): _____
First/Given Last/Family/Surname

Training Center Name: _____ Training Center #: _____

State/Province: _____ Country: _____

Email: _____ Phone: _____

T-Net Reference Signature: _____ Date: _____
Month / Day / Year

Please scan the completed reference form and email the form to admissions@TeleoUniversity.org