

Charles W. Colson Scholarship

Pastor Recommendation

TO BE COMPLETED AND SIGNED BY APPLICANT

Name of Applicant _____

APPLICANT'S WAIVER OF RIGHT OF ACCESS TO CONFIDENTIAL STATEMENT:

I hereby voluntarily waive my right of access to any information contained on this recommendation form and agree that the statement shall remain confidential.

Applicant's signature _____ Date _____

TO BE COMPLETED BY A PASTOR

The above named individual is making application to the Colson Scholarship at Wheaton College. The Institute for Prison Ministries is the administrator of this scholarship and has asked the applicant to supply information that will help us evaluate his or her application. We value your comments highly and ask that you give a full and candid report so that fair consideration may be given to the applicant. Thank you for taking your time to assist in our evaluation process.

How long have you known the applicant? _____

How well do you know the applicant? Casually Well Very Well

In what context have you known the applicant? _____

Character and Personality Ratings: Please rate the applicant on the following traits. If you have no basis for judgement, please leave blank.

	Outstanding	Above Average	Average	Below Average
Spiritual Maturity: evidence of spiritual growth, Christlike attitudes and behavior				
Integrity: Reliable, truthful				
Submits to authority: listens and respects those in authority				
Perseverance: works hard, doesn't give up				
Warmth of personality: friendly				
Concern for others: empathetic				
Personal Initiative: responsible				
Emotional maturity: manages emotions				
Copes with stress in a healthy way: avoids destructive behavior				
Humble: asks for help, admits when they are wrong, open-minded				
Stable: life, work, relationships				
Collaborative: works well with others				

To the best of your knowledge, the applicant has made a personal commitment to Jesus Christ.

YES NO I DON'T KNOW

To your knowledge, does the applicant have any attitudes or behaviors that are inconsistent with biblical principles or with Wheaton’s lifestyle expectations (for example, dishonesty, abuse of alcohol or illegal drugs, sexual immorality, or inappropriate internet usage?) See Wheaton’s Community Covenant at wheaton.edu/covenant

YES (please explain)

NO

What additional information can you provide which helps us have an accurate assessment of the applicant? (strengths, weaknesses, concerns)

Based on your observations of this applicant’s spiritual life and character, how strongly do you recommend this applicant for the Colson Scholarship and to Wheaton College?

WITH ENTHUSIASM

STRONGLY

FAIRLY STRONGLY

WITH RESERVATION

NOT RECOMMENDED

|-----|-----|-----|-----|-----|

Name _____ Position _____

Church/Organization _____ Phone number _____

Address _____

Email _____

Signature _____ Date _____

Thank you for completing this recommendation.

Please keep a copy for your records. Return your recommendation to the applicant in a sealed envelope, signed across the flap or mail to: **IPM, 501 College Ave, Wheaton, IL 60187**