

# City on the Hill Youth Leadership Conference

## PASTOR OR YOUTH LEADER RECOMMENDATION

Applicant \_\_\_\_\_

How long, and in what capacity, have you known the applicant?

Please assess the applicant relative to others you have known in a similar capacity.

What are the applicant's primary strengths and weaknesses?

For the student's benefit during the conference, please answer the following questions to the best of your ability to help us gauge how to better serve them individually:

		Low	Average	High
a.	Interest in Spiritual Growth			
b.	Knowledge of the Bible			
c.	Understanding of the Christian Worldview			
d.	Interest in the Political Process			
e.	Knowledge of the Political Process			
f.	Knowledge of controversial Issues such as abortion, homosexuality, euthanasia, etc.			
g.	Public Speaking / Debate			

## RECOMMENDATION CONTINUED

Applicant \_\_\_\_\_

What is your overall recommendation? (check one)

\_\_\_\_\_ Strongly Recommend

\_\_\_\_\_ Recommend

\_\_\_\_\_ Recommend with some reservation

\_\_\_\_\_ Do not recommend

Signature of the Recommender \_\_\_\_\_

Name of the Recommender \_\_\_\_\_

Phone \_\_\_\_\_

Position or Title \_\_\_\_\_

School / Church \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

**PLEASE MAIL OR EMAIL TO:**

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(Please return by July 3<sup>rd</sup>)