

REFERENCE QUESTIONNAIREQuestionnaire must be completed by a pastor or leader.

Name of applicant	
Access Information I hereby waive my right to access the information supplied on this form.	
Applicant's signature	Date
evaluation of his or her spiritual character. Ple a sealed envelope addressed to: HCC Admissi	this applicant's eligibility for admission, HCC requests you ase complete and sign this form and return to the college is ons Office, 500 New Creation Rd N, Newark, MO 63458. conducting this evaluation. If you would like to speak to se call 1-866-422-2340.
Name of Pastor/Leader	
Connection to Student	
Telephone	
1. How long have you known the applicant? _	
2. How well do you know the applicant? OVE	ERY WELL OCASUALLY
3. Does the applicant currently attend your chu If yes, how long has the applicant attended? OUNDER 3 MONTHS O3-6 MONTHS O6 MONTHS	
4. To the best of your knowledge, has the appl OYES ONO If unsure, please comment	licant made a personal commitment to Jesus Christ?
5. To the best of your knowledge, is the applic If unsure, please comment	

6. Please rank each statement by circling the appropriate number according to the following scale. **Strives to-2** Always-1 **Sometimes-3 Struggles-4** Never-5 A. Desires to be a disciple of Jesus Christ. 1 2 3 4 5 B. Is willing to sacrifice when asked. 1 2 3 4 5 C. Is able to be a real friend to others. 2 3 4 5 1 2 3 4 5 D. You can count on this person. E. Has Godly character. 1 2 3 4 5 F. Desires to grow in Christ. 1 2 3 4 5 G. Easily follows direction. 1 2 3 4 5 H. Is willing to serve when asked. 2 3 4 5 1 2 3 4 5 Recognizes and respects authority. J. Biblical revelation affects daily actions. 1 2 3 4 5 Why would you recommend this student to attend HCC? What are their strengths? What are their weaknesses? Signature of person completing questionnaire Date _____