

REFERENCE QUESTIONNAIRE

Questionnaire must be completed by a pastor or leader.

To the Applicant: Please provide your legal name and sign the waiver below. Submit this form to a pastor or leader. This form must be completed by a non-relative.	
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. Please c a sealed envelope addressed to: HCC Admissions (copy to <u>admissions@heartlandcollege.edu</u> . Thank	
Telephone	
1. How long have you known the applicant?	
2. How well do you know the applicant? OVERY W	ELL OWELL OCASUALLY
3. Does the applicant currently attend your church? If yes, how long has the applicant attended? OUNDER 3 MONTHS O3-6 MONTHS O6 MONTHS TO	
4. To the best of your knowledge, has the applicant OYES ONO If unsure, please comment	*
5. To the best of your knowledge, is the applicant c If unsure, please comment	currently living a Christian life? OYES ONO

6. Please rank each statement by circling the appropriate number according to the following scale. **Strives to-2 Sometimes-3** Struggles-4 Always-1 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. 1 2 3 4 5 E. Has Godly character. F. Desires to grow in Christ. 1 2 3 4 5 1 2 3 4 5 G. Easily follows direction. H. Is willing to serve when asked. 1 2 3 4 5 I. Recognizes and respects authority. 1 2 3 4 5 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 _____