

PASTOR RECOMMENDATION

Pastors, please complete the application and mail to:
Mark Mahoney
2301 N. Main St.
Auburn, IN 46706

July 5-9, 2018



Please answer the following questions to the best of your ability. This information is kept confidential. You may make additional comments in the space provided. Thank you for your time.

1. Will the applicant be a decent, good, or great camp counselor?
2. Does the applicant have any difficulty getting along with others?
3. Do you know of any problems the applicant has that would affect his/her leadership with youth?
4. BECAUSE OF OUR COMMITMENT TO THE CARE OF YOUTH IT IS VERY IMPORTANT THAT THEY BE PROTECTED IN ALL ASPECTS. To your knowledge:
 - Has the applicant ever sexually molested a child or youth and/or been charged or arrested for that crime? _____
 - Does the applicant have a chemical dependency of any kind? _____
 - Does the applicant have any serious mental or physical problems which might interfere with their effectiveness as a staff member? _____

(An affirmative answer to any of these questions may require further discussion.)
5. Would you entrust the care of your child to the applicant? _____

Additional Comments. _____

Pastor's Name

Church Name

Pastor's Signature

Date