



CORBAN
COLLEGE & GRADUATE SCHOOL
OFFICE OF ADMISSIONS
5000 DEER PARK DRIVE SE
SALEM, OREGON 97317-9392
503.375.7005 | 503.585.4316 fax
admissions@corban.edu

Pastoral Recommendation

(Please note: no action will be taken on your application until this form is returned)

TO THE APPLICANT:

Complete the section below and have your Pastor, Youth Pastor/Director, or other church leader who is familiar with your testimony and spiritual development complete the reference section. Whoever you choose should have known you for at least one year and must not be a relative.

Applicant's Name _____

Address _____ Phone (____) _____

City _____ State _____ Zip _____

I willingly waive my right to review this recommendation to better enable the person completing this form to do so without reservation.

Applicant's Signature _____ Date _____

TO THE PASTOR:

As an applicant, the student named above is required to submit a pastor's recommendation. Corban requests your evaluation of this applicant's spiritual character. **Please complete and return promptly to: Office of Admissions, Corban College & Graduate School, 5000 Deer Park Drive SE, Salem, OR 97317-9392.** If you wish to speak to an admissions counselor about this applicant, please call 1-800-845-3005 or email admissions@corban.edu.

1. How long have you known the applicant? _____

2. How well do you know the applicant? Close personal relationship Fairly Well Casually By name only

3. To the best of your knowledge, has the applicant made a personal commitment to Jesus Christ? Yes No I don't know

4a. If the answer to #3 is "yes," to the best of your knowledge is the applicant striving to live a Christian life? Yes No

4b. If the answer to #3 or #4 is "no" or "I don't know," please comment: _____

5. What spiritual gifts are evident in the applicant's life? _____

6. Describe the applicant's pattern of church attendance. _____

7. Applicant's church involvement: Youth Group Sunday School Music Leadership Other _____

8. Please describe the applicant's strengths. _____

9. Please give a brief overview of the applicant's Christian life and character. _____

10. To the best of your knowledge, are the applicant's parents Christians? _____

11. With regard to the family background, please briefly give us any information which might be helpful in understanding his/her needs. _____

12. Please check the area for each category which, in your opinion, best describes the applicant:

	Strongly Agree	Agree	Unsure/Neutral	Disagree	Strongly Disagree
Motivated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concerned for others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Influences others for good	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A leader	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respects authority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accepted by peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Discerning in behavior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-disciplined	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooperative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reliable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(over)

13. How would you describe the applicant's ability to succeed in college, both academically and socially? _____

14. Has the applicant had any disciplinary, criminal, or social problems? If yes, please comment. _____

15. Please add any additional recommendations or comments. _____

16. Your recommendation of this applicant to Corban:

Highly Recommend Recommend Recommend with reservations Do not recommend

CHURCH PROFILE (please print)

Church Name _____ Approx. Size of Youth Group _____

Church Affiliation _____

Address _____

City _____ State _____ Zip _____

Email _____ Phone () _____

Your name _____ Position _____

Signature _____ Date _____

Please send me the following information:

Viewbook General Information Poster Catalog Statement of Faith Other _____

REFERRALS

Thank you for completing this recommendation. Since Corban is a completely Christian college, your input plays an important role in the admission process. You may know of other prospective students who you believe might be interested and benefit from the educational process available at Corban. If you will use this opportunity to forward us information about them, we will provide them with materials about the college. Please consult our website for additional details about Corban: www.corban.edu.

1. Name _____ HS Grad Yr. _____

Address _____

City _____ State _____ Zip _____

Email (if known) _____ Phone () _____

High School Attending _____

2. Name _____ HS Grad Yr. _____

Address _____

City _____ State _____ Zip _____

Email (if known) _____ Phone () _____

High School Attending _____

**Mail this completed form directly to:
Office of Admissions, Corban College & Graduate School, 5000 Deer Park Drive SE, Salem, OR 97317-9392**