



CHRISTIAN CHARACTER ASSESSMENT

APPLICANT INFORMATION

Please complete this section and then give this form to a pastor, former pastor, Bible study leader, or church lay-leader. This assessment should be completed by an individual who knows you well and can provide the Admission Committee with a candid assessment of your Christian maturity. (The individual may not be a relative).

Student's Name _____ Last _____ First _____ Middle _____ Last 4 digits of SS# _____

Street/P.O. Box _____

City _____ State _____ Zip _____

Telephone _____ E-mail _____

Student Signature _____ Date _____

RECOMMENDATION

The above named student is applying to The University of Fearless. Your candid assessment of the individuals spiritual maturity and personal qualities will be of significant value to the Admission Committee. Please complete and return this form as quickly as possible. Thank You!

How long have you known the applicant? _____

In what context? _____

To the best of your knowledge, has the individual made a personal commitment to Jesus Christ? Yes No

Please describe how involved the applicant has been in the activities of your church or ministry. Inlue specific service opportunities and leadership positions.

Please describe the applicant in the following areas:

	Outstanding (top 5%)	Above Average	Average	Below Average
Spiritual Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concern for Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Influence on Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dependability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Readiness for College	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Does the applicant possess any attitudes or participate in any behaviors that are inconsistent with Fearless standards?

Additional information which may assist the Admission Committee: _____

For admission to The University of Fearless, this student is recommended:

- With Enthusiasm Strongly Fairly Strongly With Reservation Not Recommended

Print Name _____ Position/Title _____

Church/Organization _____ Telephone (_____) _____

Street/RO. Box _____ City _____ State _____ Zip _____

Signature _____ Date _____

Thank you for your assistance. Please return the completed recommendation to UOF. For mailing, fold this form along the dotted lines and tape closed.